

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90040 036 ***150.00

DOCUMENT # P00000080456

1. Entity Name
BLANCHETTE CUSTOM HOMES, INC.

Principal Place of Business
**7226 KINGSBERRY CIR.
TAMPA FL 33610**

Mailing Address
**7226 KINGSBERRY CIR.
TAMPA FL 33610**

2. Principal Place of Business
6920 E. Fowler Ave.
Suite, Apt. #, etc.
Suite A

3. Mailing Address
6920 E. Fowler Ave.
Suite, Apt. #, etc.
Suite A

City & State
Tampa, FL

City & State
Tampa, FL

Zip Country
33617 US

Zip Country
33617 US

4. FEI Number
59-3677152

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLANCHETTE, STEVEN G
7226 KINGSBERRY CIR.
TAMPA FL 33610**

Name
Steven R. Baratta
Street Address (P.O. Box Number is Not Acceptable)
2117 Boot Lake Circle
City **Tampa** FL Zip Code **33612-6510**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  **Steven R. Baratta, V. President** 2/14/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	BLANCHETTE, STEVEN G	
STREET ADDRESS	7226 KINGSBERRY CIR.	
CITY-ST-ZIP	TAMPA FL 33610	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BLANCHETTE, ANITA J	
STREET ADDRESS	7226 KINGSBERRY CIR.	
CITY-ST-ZIP	TAMPA FL 33610	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Blanchette, Steven G.	
STREET ADDRESS	7226 Kingsbury Circle	
CITY-ST-ZIP	Tampa, FL 33610	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Baratta, Steven R.	
STREET ADDRESS	2117 Boot Lake Circle	
CITY-ST-ZIP	Tampa, FL 33612-6510	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Steven G. Blanchette** 2/14/01 813-612-5664
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)