

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 20, 2001 8:00 am
Secretary of State

02-20-2001 90018 036 ***150.00

DOCUMENT # P00000080802

1. Entity Name

NEW MILLENNIUM RENOVATIONS, INC.

Principal Place of Business

Mailing Address

~~32660 US HWY 19 N~~
~~PALM HARBOR FL 34884~~

~~32660 US HWY 19 N~~
~~PALM HARBOR FL 34884~~

2. Principal Place of Business

1784 ARABIAN LN

3. Mailing Address

1784 ARABIAN LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM HARBOR, FL

City & State

PALM HARBOR, FL

Zip

34685

Country

FLORIDA

Zip

34685

Country

FLORIDA

4. FEI Number

59-3668658

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MICHAELS, THOMAS O ESQ
1370 PINEHURST RD
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name LORETO TURCO JR.

Street Address (P.O. Box Number is Not Acceptable)

1784 ARABIAN LANE

City

PALM HARBOR

FL

Zip Code

34685

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 LORETO TURCO JR. - PRESIDENT

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/14/2001

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

TITLE PT
NAME TURCO, LORETO JR
STREET ADDRESS 1784 ARABIAN LN
CITY-ST-ZIP PALM HARBOR FL 34685 ☐ Delete

TITLE V
NAME SICKLE, DANIEL
STREET ADDRESS 522 HUMPHRIES RD
CITY-ST-ZIP SAFETY HARBOR FL 34685 ☐ Delete

TITLE V
NAME HASLEY, STEVEN M
STREET ADDRESS 32660 US HWY 19 N
CITY-ST-ZIP PALM HARBOR FL 34684 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

LORETO TURCO JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/14/01

800-321-8511

Daytime Phone #

CR2E034 (10/00)