FROM : TL&B PHONE NO. : 941 643 304

FILED
Jun 20, 2002 8:00 am
Secretary of State
05-21-2002 90891 044 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000112901

1. Entity Name
ARTSTONE OF NAPLES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	DO NOT WRITE IN THIS SPACE
4480 DOMESTIC AVE Suite, Apt. #, etc.	~~[illegible]~~ 18956 Pine Run Lane Suite, Apt. #, etc.	
City & State: Naples, FL	City & State: Ft. Myers, FL	4. FEI Number: 65-1005200 ☐ Applied For ☐ Not Applicable
Zip: 34109 Country: USA	Zip: 33912 Country: USA	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Russell V. Weber

Street Address (P.O. Box Number is Not Acceptable)
18956 Pine Run Lane

City: Ft. Myers FL Zip Code: 33912

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: _____ Russell V. Weber _____
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) ☐

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

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	Russell V. Weber
STREET ADDRESS	18956 Pine Run Lane
CITY-ST-ZIP	Ft. Myers, FL 33912
TITLE	VICE PRESIDENT
NAME	Sheri J. Weber
STREET ADDRESS	18956 Pine Run Lane
CITY-ST-ZIP	Ft. Myers, FL 33912
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Russell V. Weber 4/29/02 941-481-2594
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #