

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000002077

1. Entity Name

Destin Aluminum Railing SERVICES INC.



FILED

03 AUG 14 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
16580 US Highway 331S

3. Mailing Address
16580 US Highway 331S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Freeport, FL

City & State
Freeport, FL

4. FEI Number 59-3690815

Applied For

Not Applicable

Zip
32439

Country

Zip
32439

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Ronda Bolin

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

16580 US Highway 331S

City Freeport

FL

Zip Code
32439

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

Ronda Bolin

08-13-03

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Bolin, Terry
16580 US Highway 331S Freeport, FL 32439

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Bolin, Ronda
16580 US Highway 331S Freeport, FL 32439

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Cook, Mike
146 Red Barn Road Freeport, FL 32439

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
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**DO NOT WRITE
IN THIS SPACE**

SP 8/14/03

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronda Bolin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronda Bolin, VP

08-13-03

850-835-2355

Date

Daytime Phone #

CR2E0348 (12/02)