

2001 UNIFORM BUSINESS REPORT (UBR) AMENDMENT

DOCUMENT # **PO1000009452**

1. Entity Name

YOULDEN GARAGE DOORS, INC

Principal Place of Business

Mailing Address

**4651 SE 11TH PL #2
CAPE CORAL FL 33904**

2. Principal Place of Business

3. Mailing Address

3118 SE 19TH PL

3118 SE 19TH PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

CAPE CORAL FL

CAPE CORAL FL

Zip

Country

Zip

Country

33904

LEE

33904

LEE

4. FEI Number

Applied For

59-3694645

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

**SALVATORE FELICE
1424 SW 51ST LN
CAPE CORAL FL 33914**

Name **J. BARON BAPTISTE**
Street Address (P.O. Box Number is Not Acceptable) **1215 SE 29TH TERR**
City **CAPE CORAL** FL **33904**

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 **J. BARON BAPTISTE SECY/TRANS J. Baron Baptiste 10/16/01**
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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **PRESIDENT/ST** ☒ Delete
NAME **SALVATORE FELICE**
STREET ADDRESS **1424 SW 51ST LN**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE **P/D/C** ☒ Change ☒ Addition
NAME **MICHAEL J TAYLOR**
STREET ADDRESS **3118 SE 19TH PL**
CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SIT** ☒ Change ☐ Addition
NAME **J. BARON BAPTISTE**
STREET ADDRESS **1215 SE 29TH TERR**
CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **100004699611-1**
STREET ADDRESS **-11/30/01--01014--026**
CITY-ST-ZIP *******70.00 *****70.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **1 AD** ☐ Change ☐ 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 **[Signature]** **10/16/01**

CR2E034 (5/01)