## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 27, 2002 8:00 am P01000023052 DOCUMENT # **Secretary of State** 1. Entity Name CUSTOM COVERINGS, INC. BY JOHN DACEY 02-27-2002 90041 025 \*\*\*150.00 Principal Place of Business Mailing Address 2946 HAWTHORN COURT 2946 HAWTHORN COURT NAPLES FL 34104 NAPLES FL 34104 Principal Place o 060-Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For -3706064 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Burns GREUSEL, JAMIE B **BERRY & GREUSEL** 1104 N. COLLIER BLVD MARCO ISLAND FL 34145 8. The Boove named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (9/01 Addition TITLE Delete TITLE GREUSEL, JAMIE B BURNS, ELLEN NAME NAME 1102 N. COLLIER BLVD STREET ADDRESS STREET ADDRESS 2946 Hawthorne Ct. MARCO ISLAND FL 34145 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Channe □ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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

SIGNATURE:

changed, or on an attachment with

an address, with all other like empowered