

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

03-14-2002 90069 002 ***150.00

0006730 AV

DOCUMENT # P01000035460

1. Entity Name

BEN LONIC PAINTING ENTERPRISES, INC.

Principal Place of Business

114 NORTHEAST FIRST STREET
TRENTON FL 32693

Mailing Address

PO BOX 308
TRENTON FL 32693

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3711583

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

BURT, THEODORE M ESQ
114 NORTHEAST FIRST STREET
TRENTON FL 32693

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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 \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. 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	D	<input type="checkbox"/> Delete
NAME	LONIC, BEN	
STREET ADDRESS	PO BOX 294	
CITY-ST-ZIP	TRENTON FL 32693	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Delete
NAME	LONIC, JOYCE	
STREET ADDRESS	PO BOX 294	
CITY-ST-ZIP	TRENTON FL 32693	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

BEN LONIC
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/02

Date

352-463-1827

Daytime Phone #

CR2E034 (9/01)

ATTACHMENT Doc# PO1000035460

BURT & FEATHER
Attorneys at Law
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Post Office Box 308
Trenton, Florida 32693

337599

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Mark J. Feather
Patti Lee Meeks

(352) 463-2348
fax (352) 463-6908

March 4, 2002

Department of State
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

Re: Ben Ionic Painting Enterprises, Inc.

Gentlemen:

Enclosed please find the 2002 Uniform Business Report regarding the referenced corporation, together with a check in the amount of \$150.00 to cover the filing fee.

Yours truly,

Susan Thorsen

Susan Thorsen
Legal Assistant

/st

Enclosures: Report
 Check

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