## 2003 FOR PROFIT CORPORATION

## FILED Jan 22, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR Secretary of State** P01000044484 DOCUMENT # 01-22-2003 90139 046 \*\*\*150.00 CHRIS BORLAND CARPENTRY, INC. Principal Place of Business Mailing Address 13632 DRYSDALE AVE 13632 DRYSDALE AVE PT CHARLOTTE FL 33981 PT CHARLOTTE FL 33981 2. Principal Place of Business 3. Mailing Address 11521 Wray 1/521 Wray Court Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For 65-1102871 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name of a large control LEI FINANCIAL SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 5348 DREW RD VENICE FL 34293 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Addition Borland, Christopher BORLAND, CHRISTOPHER D NAME NAME 13632 DRYSDALE AVE 11521 wray court STREET ADDRESS STREET ADDRESS PT CHARLOTTE FL 33981 CITY-ST-7IP CITY-ST-ZIP Parker, Colorado TITLE ☐ Delete TITLE Change ☐ Addition Borland, Janet 6 BORLAND, JANET L NAME NAME 13632 DRYSDALE AVE STREET ADDRESS STREET ADDRESS 11501 wray court PT CHARLOTTE FL 33981 CITY-ST-ZIP CITY-ST-ZIP Parker, Colorado 80134 TITLE Delete . TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 10 or Block 11 if changed, or on an attact

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

☐ Change

Addition