

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90091 004 ***150.00

0124504 AV

DOCUMENT # P01000061882

1. Entity Name

LAVERY AND SONS PAINTING INC.

Principal Place of Business

**3285 14TH STREET
 VERO BEACH FL 32960**

Mailing Address

**3285 14TH STREET
 VERO BEACH FL 32960**

2. Principal Place of Business

3285 14TH ST.

Suite, Apt. #, etc.

3. Mailing Address

3285 14TH ST.

Suite, Apt. #, etc.

City & State

VERO BEACH FL.

City & State

VERO BCH. FL.

4. FEI Number

59-373-0089

Applied For

Not Applicable

Zip

32960

Country

INDIAN RIVER

Zip

32960

Country

INDIAN RIVER

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LAVERY, MARK
 3285 14TH STREET
 VERO BEACH FL 32960**

7. Name and Address of New Registered Agent

Name **MARK J. LAVERY**

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

3285 14TH ST.

City **VERO BEACH.**

FL

Zip Code

32960

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

Mark J. Lavery

(NOTE: Registered Agent signature required when reinstating)

1/16/02

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 State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
 NAME **VICE PRES.**
 STREET ADDRESS **JOHN LAVERY**
 CITY-ST-ZIP **3285 14TH ST.
 VERO BEACH FL 32960**

TITLE ☐ Change ☒ Addition
 NAME **TRES.**
 STREET ADDRESS **TIMOTHY LAVERY**
 CITY-ST-ZIP **3285 14TH ST.
 VERO BEACH FL 32960**

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

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

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

TITLE ☐ 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:

Mark J. Lavery
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-02

Date

861-564-7311

Daytime Phone #

CR2E034 (9/01)