

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State
 05-02-2002 90123 026 ***158.75

DOCUMENT # P01000069827
1. Entity Name
 BELLA CASA CABINETRY INC.

Principal Place of Business **Mailing Address**
~~612 GRAN KAYMEN WAY~~ **305 B S** ~~612 GRAN KAYMEN WAY~~
~~APOLLO BEACH FL 33572~~ ~~APOLLO BEACH FL 33572~~

2. Principal Place of Business **3. Mailing Address**
305-B Scarlet Blvd **6565 ULMERTON RD**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
Oldsmar, FL **LARGO, FL**
Zip **Country** **Zip** **Country**
34677 **USA** **33771** **USA**

4. FEI Number **373.1566** **59** **Applied For**
Not Applicable
5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 AGENTS AND CORPORATIONS, IC.
 773 4TH AVENUE NORTH SUITE E
 NAPLES FL 34102

7. Name and Address of New Registered Agent
Name **Vicki Shaffer**
Street Address (P.O. Box Number is Not Acceptable) **6565 ULMERTON RD**
LARGO, FL
City **FL** **Zip Code** **33771**

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 Vicki Shaffer **OWNER/CFO** **1/14/02**
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 State
10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRESIDENT William Voorheis 1238 Berkshire Lane TARPON SPRINGS, FL 34689 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CFO VICKI SHAFER 612 GRAN KAYMEN WAY APOLLO BEACH, FL 33572 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ARTHUR SNOW, VP of Ops. 9906 Sugar Mill Dr Bradenton, FL 34202 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MARC SCHNARR 10417 GREENHEDGES TAMPA, FL 33626 Sales | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: Vicki Shaffer **OWNER/CFO** **1/14/02** **813 380 7491**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)