

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

PAGE 1 of 2

DOCUMENT # **PD1000083148**

1. Entity Name

**Florida Perfectionist Painting Co. Inc.**



FILED

03 OCT 24 PM 12:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**Jacksonville, Florida**

3. Mailing Address

**3711 Trout River Blvd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**Jacksonville, Florida**

Zip

Country

Zip  
**32208**

Country  
**USA**

**400024057324**  
10/24/03--01002--030 \*\*150.00

**REINSTATEMENT** **03**  
DO NOT WRITE IN THIS SPACE

4. FEI Number

**59-3739910**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
**Carter Ricky Glass**

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

**4567 Longleaf Court**

City  
**Orange Park**

**FL**

Zip Code  
**32073**

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)

**10-20-2003**

DATE

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Carter Ricky Glass P/D**  
**4567 Longleaf Court**  
**Orange Park, Fla. 32073**

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

*10/29*

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Carter Ricky Glass*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**10-20-2003**

Date

**904-768-6486**

Daytime Phone #

CR2E034B (12/02)

*Evelyn Noel - Accountant*

Member National Association of Public Accountants

3711 Trout River Blvd.  
Jacksonville, Florida 32208  
Telephone 768-6486  
Fax 764-1881

October 8, 2003

Division of Corporations  
Florida Dept of State  
P O Box 6327  
Tallahassee, Florida 32314

re: ~~Florida Perfectionist Painting Co Inc~~ - *PO100083148*

Gentlemen:

In reference to the above mentioned Florida Corporation and in reference to the renewal of this Corporation as of this date we have received no notice to renew or what the status of this Corporation is. I have gone on line and it shows a problem. I have been missing some mail this year and can't understand why I haven't received this notice.

I am enclosing a check to renew the Unified Business Report.

Thanking you in advance I am.

Sincerely,

*Evelyn Noel*

Evelyn Noel

cc; file