

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000093155

FILED
Feb 13, 2002 8:00 AM
Secretary of State

Entity Name: SPYGLASS CONSTRUCTION & REMODEL, INC.

Current Principal Place of Business:

749 CROSSFIELD CIRCLE
NAPLES, FL 34104

New Principal Place of Business:

4420 MERCANTILE AVE.
SUITE #8
NAPLES, FL 34104

Current Mailing Address:

749 CROSSFIELD CIRCLE
NAPLES, FL 34104

New Mailing Address:

4420 MERCANTILE AVE.
SUITE #8
NAPLES, FL 34104

FEI Number: 59-3745748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REEVE, DIAMOND D
749 CROSSFIELD CIRCLE
NAPLES, FL 34104

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REEVE, S. GABRIELLA
Address: 749 CROSSFIELD CIRCLE
City-St-Zip: NAPLES, FL 34104

Title: V () Delete
Name: REEVE, DIAMOND D
Address: 749 CROSSFIELD CIRCLE
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: REEVE, S. GABRIELLA
Address: 749 CROSSFIELD CIRCLE
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change () Addition
Name: REEVE, DIAMOND D
Address: 749 CROSSFIELD CIRCLE
City-St-Zip: NAPLES, FL 34104

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. GABRIELLA REEVE

PRES

02/13/2002

Electronic Signature of Signing Officer or Director

Date