

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000093155

FILED
Apr 21, 2003
Secretary of State

Entity Name: SPYGLASS CONSTRUCTION & REMODEL, INC.

Current Principal Place of Business:

4420 MERCANTILE AVE.
SUITE #8
NAPLES, FL 34104

New Principal Place of Business:

4375 PROGRESS AVENUE
SUITE #415
NAPLES, FL 341043001 US

Current Mailing Address:

4420 MERCANTILE AVE.
SUITE #8
NAPLES, FL 34104

New Mailing Address:

4375 PROGRESS AVENUE
SUITE #415
NAPLES, FL 341043001 US

FEI Number: 59-3745748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVE, DIAMOND D
749 CROSSFIELD CIRCLE
NAPLES, FL 34104

Name and Address of New Registered Agent:

REEVE, DIAMOND D
985 CHESAPEAKE BAY CT.
NAPLES, FL 341202912 US

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: DIAMOND D. REEVE

04/21/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Title: VP () 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: 985 CHESAPEAKE BAY CT.
City-St-Zip: NAPLES, FL 341202912 US

Title: VP (X) Change () Addition
Name: REEVE, DIAMOND D
Address: 985 CHESAPEAKE BAT CT.
City-St-Zip: NAPLES, FL 341202912 US

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: STEFANY GABRIELLA REEVE

PRES

04/21/2003

Electronic Signature of Signing Officer or Director

Date