

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90098 023 ***150.00

DOCUMENT # P01000100840

1. Entity Name
MOORE GARAGE DOORS, INC.

Principal Place of Business
1809 MICCOSUKEE COMMONS BLVD
SUITE 108
TALLAHASSEE FL 32308

Mailing Address
1809 MICCOSUKEE COMMONS BLVD
SUITE 108
TALLAHASSEE FL 32308

2. Principal Place of Business
9442 Courtney Lane

3. Mailing Address
9442 Courtney Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Tallahassee, FL

City & State
Tallahassee, FL

4. FEI Number
59-3751676

Applied For
☐ Not Applicable

Zip
32305

Country
USA

Zip
32305

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GLOVER, RICHARD A
1809 MICCOSUKEE COMMONS BLVD
SUITE 108
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name
Keith R. Moore
 Street Address (P.O. Box Number is Not Acceptable)
9442 Courtney Lane
 City
Tallahassee **FL** Zip Code
32305

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 *Keith R. Moore* **Keith R. Moore**

4/25/02
 DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 **D** ☐ Delete
 NAME **MOORE, KEITH R**
 STREET ADDRESS **9442 COURTNEY LANE**
 CITY-ST-ZIP **TALLAHASSEE FL 32305**

TITLE **D** ☐ Delete
 NAME **MOORE, MELODY J**
 STREET ADDRESS **9442 COURTNEY LANE**
 CITY-ST-ZIP **TALLAHASSEE FL 32305**

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
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
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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: *Keith R. Moore* **REQUIRED Keith R. Moore**

4/25/02
 Date

Daytime Phone #

CR2E034 (9/01)