

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000060062

FILED  
Jan 08, 2003  
Secretary of State

Entity Name: ELEGANT STONES & GRANITE, INC.

## Current Principal Place of Business:

548 CHATHAM STREET  
JACKSONVILLE, FL 32254

## New Principal Place of Business:

## Current Mailing Address:

548 CHATHAM STREET  
JACKSONVILLE, FL 32254

## New Mailing Address:

FEI Number: 46-0487110

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARTROLL, SANDY  
1866 OAK TRAIL  
CALLAHAN, FL 32011 US

## Name and Address of New Registered Agent:

CARROLL, SANDY  
1866 OAK TRAIL  
CALLAHAN, FL 32011 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: SANDY CARROLL

01/08/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CARROLL, SANDY  
Address: 1866 OAK TRAIL  
City-St-Zip: CALLAHAN, FL 32011

Title: VD ( ) Delete  
Name: REED, GAYLA  
Address: 6445 NANCY ROAD  
City-St-Zip: CALLAHAN, FL 32011

Title: SD ( ) Delete  
Name: HOWARTER, GRGE L  
Address: 273417 MARIE ROAD  
City-St-Zip: HILLIARD, FL 32046

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: HOWARTER, GREGG L  
Address: 273417 MURRHEE ROAD  
City-St-Zip: HILLIARD, FL 32046

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: SANDY CARROLL

PD

01/08/2003

Electronic Signature of Signing Officer or Director

Date