

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

0009431 AT

DOCUMENT # P02000125539

1. Entity Name
LIFETIME SOLID SURFACE, INC.



04-21-2003 90376 030 ***150.00

Principal Place of Business
**811-B CYPRESS VILLAGE BOULEVARD
RUSKIN FL 33573**

Mailing Address
**811-B CYPRESS VILLAGE BOULEVARD
RUSKIN FL 33573**



2. Principal Place of Business
501 S. FALKENBURG

3. Mailing Address
2502 WILLIAMS Rd

Suite, Apt. #, etc.
C-15

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
TAMPA, FL

City & State
BRANDON, FL

4. FEI Number
13-4223872

Applied For
Not Applicable

Zip Country
33619 USA

Zip Country
33510 USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DURHAM, CHRISTOPHER M
811-B CYPRESS VILLAGE BOULEVARD
RUSKIN FL 33573**

Name
Street Address (P.O. Box Number is Not Acceptable)
2502 WILLIAMS RD
City **BRANDON** FL Zip Code **33510**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PTD**
STREET ADDRESS **DURHAM, CHRISTOPHER M**
CITY-ST-ZIP **2502 WILLIAMS ROAD BRANDON FL 33510**

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

TITLE ☐ Delete
NAME **SVD**
STREET ADDRESS **DURHAM, REBECCA L**
CITY-ST-ZIP **2502 WILLIAMS ROAD BRANDON FL 33510**

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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

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, trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **REBECCA L DURHAM**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-03 813-643-9829
Date Daytime Phone #

CR2E034 (10/02)