

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 15, 2005 8:00 am**  
**Secretary of State**

02-15-2005 90019 017 \*\*\*158.75

DOCUMENT # **P93000019090**

1. Entity Name **Universal structures of Central  
Florida, Inc  
3106 Canterbury Lane  
Largo, FL 33770**



**DO NOT WRITE IN THIS SPACE**

**40018616**

2. Principal Place of Business **3106 Canterbury Lane** 3. Mailing Address **3106 Canterbury Lane**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**Largo, FL**

City & State  
**Largo, FL**

4. FEI Number  
**593236129**

Applied For  
Not Applicable

Zip  
**33770**

Country  
**Pinellas**

Zip  
**33770**

Country  
**Pinellas**

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

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
**n R. L. Weir**

Street Address (P.O. Box Number is Not Acceptable)

**3106 Canterbury Lane**

City  
**Largo**

**FL**

Zip Code  
**33770**

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 **R. L. Weir**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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**

TITLE  
NAME **President  
R. L. Weir**  
STREET ADDRESS  
**3106 Canterbury Lane**  
CITY-ST-ZIP  
**Largo, FL 33770**

TITLE  
NAME **Vice President  
R. L. Weir**  
STREET ADDRESS  
**3106 Canterbury Lane**  
CITY-ST-ZIP  
**Largo, FL 33770**

TITLE  
NAME **Secretary  
R. L. Weir**  
STREET ADDRESS  
**3106 Canterbury Lane**  
CITY-ST-ZIP  
**Largo, FL 33770**

TITLE  
NAME **Treasurer  
R. L. Weir**  
STREET ADDRESS  
**3106 Canterbury Lane**  
CITY-ST-ZIP  
**Largo, FL 33770**

TITLE  
NAME **Director  
R. L. Weir**  
STREET ADDRESS  
**3106 Canterbury Lane**  
CITY-ST-ZIP  
**Largo, FL 33770**

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE: **R. L. Weir**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/10/05**  
Date

**727-584 8534**  
Daytime Phone #

CR2E034B (12/02)