

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000023129

1. Entity Name

SPECIALIZED PAINTING, INC.

FILED

Mar 13, 2000 8:00 am  
Secretary of State

03-13-2000 90035 041 \*\*\*150.00

Principal Place of Business

Mailing Address

6913 HARNEY ROAD  
TAMPA FL 33617  
US

6913 HARNEY ROAD  
TAMPA FL 33617-9201  
US

LU036010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3173670

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CARNEY, DANIEL M  
1521 RIVERSHORES WAY  
TAMPA FL 33603

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete  
NAME CARNEY, DANIEL M  
STREET ADDRESS 1521 W. RIVER SHORE WAY  
CITY-ST-ZIP TAMPA FL

TITLE DP ☒ Change ☐ Addition  
NAME Carney, Daniel  
STREET ADDRESS 305 Bryan Oak Ave  
CITY-ST-ZIP Brandon, FL 33511

TITLE VP ☐ Delete  
NAME CARNEY, GYIA M  
STREET ADDRESS 1521 RIVERSHORES WAY  
CITY-ST-ZIP TAMPA FL

TITLE VP ☒ Change ☐ Addition  
NAME Carney, Gylia  
STREET ADDRESS 305 Bryan Oak Ave  
CITY-ST-ZIP Brandon, FL 33511

TITLE VP ☐ Delete  
NAME CARNEY, SEAN  
STREET ADDRESS 1419 EAST HENRY AVENUE  
CITY-ST-ZIP TAMPA FL 33603

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

TITLE S ☐ Delete  
NAME CARNEY, LORITA  
STREET ADDRESS 1419 EAST HENRY AVENUE  
CITY-ST-ZIP TAMPA FL 33603

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-00

Date

813-985-4455

Daytime Phone #