200 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9300043382 1. Entity Name TOPLIFF PAINTING, INC.

Principal Place of Business

Mailing Address

17190 KEY VIZCAYA CT FT MYER\$ FL 33908

17190 KEY VIZCAYA CT FT MYERS FL 33908

2. Principal Place of Business 3. Mailing Address

FILED May 11, 2001 8:00 am Secretary of State

05-11-2001 90291 024 ***150.00



17571 ROCKFELLER CR. 17571 ROCKEFEL			EFELLER	CR	()EBIJEB! IIB (BIJ	ON ISHIY MAINI ORNIS	8 8151 6 8 511 8 1 8 8 8	11100 13101 10		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & Stat	YERS, FL	City & State FT, MYERS	FL	4.	FEI Number	55-042 <u>8</u> 203),		oplied For ot Applicable]
33912	-5805 LEE	33912-5805	Country LEE	5.	Certificate of Sta	atus Desired		8.75 Add se Require		
1, -		7.	Name and Addi	ress of New R	egistered Aç	ent]		
TOPL . 1719 FT M	Name Street Ac	Idress (P.O. I 21 - B	Box Number is N CONG D	Not Acceptable	් <u>ට</u>					
			City F	FT. MYERS FL Zip Con					908-4216	
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 filling requirement and elects to do so. (See criteria on back) FILE NOW!!! After MAY 1, 2001 Make Check Payable				50.00 of State	Trust Fui	Campaign Fin nd Contribution	n. 🗖	Added	May Be I to Fees	
11.	OFFICERS AND DIF	RECTORS	12.	ΑC	DDITIONS/CHAP	NGES TO OFFI	ICERS AND D	RECTOR	S IN 11	۱_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TOPLIFF, JACK E JR 17190 KEY VIZCAYA CT FT MYERS FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7121- FT. 1	B CON NYERS	GDON FL	RD.	\ Change	☐ Addition	CR2E034 (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TOPLIFF, ROBERT 7121-A CONGDON RD FT MYERS FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, , , ,			□ Change	☐ Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TOPLIFF, KATHY 17190 KEY VIZCAYA CT FT MYERS FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7/21-1	B CONG MYERS	DON A	ds EE	© Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILES, MITCHELL L 9169 SEVILLE RD FORT MYERS FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7961	GLADIO 1YER S	LUS D	R., A	Unanys	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOPLIFF, TODD 7121-A CONGDON RD FORT MYERS FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		[_ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOPLIFF, MICHAEL 13301 FIRST STREET FORT MYERS FL 33905	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7121-1 FT. 1	g CON NYERS;	IGDON FL		Change	☐ Addition	

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.