

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000063993

1. Entity Name

SET-RITE CERAMIC TILE, INC.

FILED
Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90240 007 ***150.00

114794



DO NOT WRITE IN THIS SPACE

Principal Place of Business 4818 DUNBARTON DR ORLANDO FL 32817	Mailing Address 4818 DUNBARTON DR ORLANDO FL 32817
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	59-3202859	Applied For
		Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SCHWAEGERL, SHERRI F 2114 STAUNTON AVENUE WINTER PARK FL 32789

7. Name and Address of New Registered Agent	
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, 2001 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	
TITLE	P
NAME	SCHWAEGERL, SHERRI F.
STREET ADDRESS	2114 STAUNTON AVE
CITY-ST-ZIP	WINTER PARK FL
TITLE	VP
NAME	DAVIS, RICHARD
STREET ADDRESS	200 ST ANDREWS BLVD, #1102
CITY-ST-ZIP	WINTER PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	President
NAME	Davis, Richard G.
STREET ADDRESS	4818 Dunbarton Dr
CITY-ST-ZIP	Orlando, FL 32817
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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:

Richard G. Davis - Richard G. Davis - P 2-7-01 (407) 644-1003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)