

2005

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90386 015 \*\*\*150.00

DOCUMENT # P93000073190

1. Entity Name

CONTRACT HOUSE DRAPERIES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6593 POWERS AVE

Suite, Apt. #, etc.

SUITE 13

City &amp; State

JACKSONVILLE FL

Zip

32217

Country

USA

3. Mailing Address

6593 POWERS AVE

Suite, Apt. #, etc.

SUITE 13

City &amp; State

JACKSONVILLE FL

Zip

32217

Country

USA

14012367

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1395938

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

ZIMMERMAN, LANNY L

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

6593 POWERS AVE

SUITE 13

City

JACKSONVILLE

FL

Zip Code

32217

DO NOT WRITE  
IN THIS SPACE

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

NAME

STREET ADDRESS

CITY - ST - ZIP

**D**  
ZIMMERMAN, LANNY L  
6593 POWERS AVE, SUITE 13  
JACKSONVILLE FL 32217

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: LANNY L ZIMMERMAN

*Lanny L Zimmerman* 737-9077  
4-28-05

CR2E034B (11/01)