

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000017440

1. Entity Name

FULL PHASE WATERPROOFING SERVICES, INC.

Principal Place of Business

5501 28TH STREET NORTH SUITE 44
SUITE #7
ST PETERSBURG FL 33714

Mailing Address

5501 28TH STREET NORTH SUITE 44
SUITE #7
ST PETERSBURG FL 33714

2. Principal Place of Business

5501 28th St. No.
Suite, Apt. #, etc.
#7 (not #44)

City & State
St. Petersburg, FL

Zip
33714

Country

U.S.A.

3. Mailing Address

5501 28th St. No.
Suite, Apt. #, etc.
#7 (not #44)

City & State
St. Petersburg, FL

Zip
33714

Country

U.S.A.

FILED
Jan 09, 2002 8:00 am
Secretary of State

01-09-2002 90006 026 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3233554

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BODENBENDER, ERHICK
5501 28TH STREET NORTH SUITE 44
ST PETERSBURG FL 33714

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, 2002 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 D
NAME BODENBENDER, ERHICK V
STREET ADDRESS 5501 28TH STREET NORTH SUITE 24
CITY-ST-ZIP ST PETE FL ☐ Delete

TITLE D
NAME BODENBENDER, THOMAS A
STREET ADDRESS 5501 28TH STREET NORTH, SUITE 44
CITY-ST-ZIP ST PETERSBURG FL ☐ Delete

TITLE TS
NAME BODENBENDER, KERRI R
STREET ADDRESS 5501 28TH ST N STE #7
CITY-ST-ZIP SAINT PETERSBURG FL 33714 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Suite #7 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Suite #7 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Suite #7 ☒ Change ☐ Addition

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

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

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

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

Erhick Bodenbender 1-7-02 (727) 525-1980

Date

Daytime Phone #

CR2E034 (9/01)