2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P94000073631** Apr 20, 2000 8:00 am Secretary of State QUALITY FIRST PAINTING, INC. 04-20-2000 90013 044 ***150.00 Principal Place of Business Mailing Address 6561 TAYLOR RD. 6561 TAYLOR RD. NAPLES FL 34109-1867 NAPLES FL 34109 3. Mailing Address 2. Principal Place of Business 453<u>2</u> DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0525067 Not Applicable APLES Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required AZD. 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **NEWMAN, FRANCIS D** Street Address (P.O. Box Number is Not Acceptable) 4532 25TH CRT SW NAPLES FL 34116 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. DEMMEN FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PRESIDENT PD JUE Change 🔀 Addition ☐ Delete TITLE TITLE JARAD NEWMAN **NEWMAN, FRANCIS** NAME NAME GREENBACK Cindle Apt 4532 25TH CRT SW STREET ADDRESS 2185 STREET ADDRESS MAPIES CITY-ST-7IP NAPLES FL 34116 CITY-ST-ZIP るりにつ OFFICER Change ☐ Addition . Delete TITLE TITLE alexamore, share ALEXANDER, SHANE NAME 4532 25M C15W 4532 25TH CRT SW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 34116 CITY-ST-ZIE NAPLES FL 34116 Change Addition TITLE" TITLE Delete ALEXANDER, CHRISTINE NAME NAME STREET ADDRESS 4532 25TH CRT SW STREET ADDRESS CITY-ST-ZIP NAPLES FL 34116 CITY-ST-ZIP ☐ Change Addition TITLE □ Delete NEWMAN, RENEE NAME NAME STREET ADDRESS 4532 25TH CT SW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34116 ☐ Change ☐ Addition Delete TITLE TITLE NAULT, RICHARD R NAME NAME STREET ADDRESS 330 11TH AVE SO STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34101 Change ☐ Addition ☐ Delete TITLE TITLE

13. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO