

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000006487

1. Entity Name

T.H. WINSTON GRANITE & MARBLE, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90294 031 ***150.00

Principal Place of Business

~~4034 NORTH WASHINGTON BLVD.~~
~~UNIT #1~~
~~SARASOTA FL 34234~~

Mailing Address

4380 INDEPENDENCE COURT
UNIT #1
SARASOTA FL 34234-4711
US

646065



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4384 Independence Court

3. Mailing Address

Suite, Apt. #, etc.

Suite A

City & State

Sarasota, FL 34234-4711

City & State

4. FEI Number 31-0820700

Applied For

Not Applicable

Zip

Country

Zip

Country

34234-4711 Sarasota

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MACPHAIL, GORDON
4380 INDEPENDENCE COURT
UNIT #1
SARASOTA FL 34234

7. Name and Address of New Registered Agent

Name

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

City

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 re-registering)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
MACPHAIL, GORDON
4380 INDEPENDENCE COURT
SARASOTA FL 34234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MACPHAIL, PAUL
4380 INDEPENDENCE CT.
SARASOTA FL 34234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MACPHAIL, ROY
4380 INDEPENDENCE CT.
SARASOTA FL 34234 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MACPHAIL, DINISE
4380 INDEPENDENCE CT.
SARASOTA FL 34234 ☐ 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
☐ 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

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

GORDON MAC PHAIL

4/23/01
Date

941 351-7331
Telephone #

CR2E034 (10/00)