

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000027917

1. Entity Name

BAY AREA REMODELERS, INC.

FILED

Apr 05, 2000 8:00 am  
Secretary of State

04-05-2000 90114 005 \*\*\*150.00

Principal Place of Business

Mailing Address

11999 49TH STREET NORTH STE 102  
CLEARWATER FL 33762  
US

11999 49TH STREET NORTH STE 102  
CLEARWATER FL 33762-4316  
US

2. Principal Place of Business

12795 49TH ST. N.

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CLEARWATER, FL.

City & State

Zip

Country

33762

USA

4. FEI Number

59-3313158

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCGINLEY, KEVIN  
11999 49TH STREET NORTH STE 102  
CLEARWATER FL 34622

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
POZIN, MITCHELL  
1729 - 29TH STREET NORTH  
ST. PETERSBURG FL 33713 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
220 98TH AVE. N.E.  
ST PETERSBURG, FL 33702 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PVD  
MCGINLEY, KEVIN  
8200 HEARTWOOD LANE  
BAYONET POINT FL 34667 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
10053 60TH ST.  
PINELLAS PARK FL 33782 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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 of Kevin P. McGinley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/00 727-571-1774  
Date Daytime Phone #

CR2E034 (9/99)