

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000000447

1. Entity Name

ANDERSON SCREEN AND VINYL, INC.



FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90094 011 ***150.00

Principal Place of Business

954 PINE ISLAND RD
UNIT L
CAPE CORAL FL 33909
US

Mailing Address

954 PINE ISLAND RD
UNIT L
CAPE CORAL FL 33909
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0629706

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

ANDERSON, JAMES E
954 PINE ISLAND RD
UNIT L
CAPE CORAL FL 33909

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	ANDERSON, JAMES E	419 NW 13TH ST CAPE CORAL FL 33993	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	D	ANDERSON, BETH L	419 NW 13TH ST CAPE CORAL FL 33993	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	AT	JAMES P ANDERSON 6781 MAMA LN N FT MYERS FL 33917		<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/2/00 (941) 458-9499
Date Daytime Phone #

CR2E034 (5/00)



Anderson Screen and Vinyl, Inc.

954 Pine Island Rd. Unit L, Cape Coral, FL 33909

Telephone (941) 458-9699

Fax (941) 458-9353

ATTACHMENT
#P96000000447
00071367

August 2, 2000

Division of Corporations
Uniform Business Report-Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Enclosed is the 2000 Uniform Business Report for Anderson Screen and Vinyl, Inc.
(Document # P96000000447) along with a payment of \$150.00

This letter is to let you know that we never received the first request for this report. I talked with Kelly today and she suggested that I send a letter explaining that I did not receive the first mailing and said you would probably waive the additional \$400 fee.

If you have any further questions about this, please call me at (941)458-9699.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads 'Beth L. Anderson'.

Beth L. Anderson
Vice President