

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90032 018 ***150.00

DOCUMENT # P96000046189

1. Entity Name
KAVEY HOLDING CORP.

Principal Place of Business

1475 12TH ST E
 PALMETTO FL 34221
 US

Mailing Address

1475 12TH ST EAST
 PALMETTO FL 34221

2. Principal Place of Business

5330 ASHTON COURT
 Suite, Apt. #, etc.

3. Mailing Address

5330 ASHTON COURT
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

SARASOTA, FL

City & State

SARASOTA, FL

4. FEI Number

65-0668201

Applied For

Not Applicable

Zip
 34233

Country
 SARASOTA

Zip
 34233

Country
 SARASOTA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KAVEY, WILLIAM
 1475 12TH ST E
 PALMETTO FL 34221

7. Name and Address of New Registered Agent

Name
 ROGER T. NATHANSON

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

5330 ASHTON COURT

City
 SARASOTA

FL

Zip Code
 34233

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

William Kavey

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-5-02

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
NAME
STREET ADDRESS
CITY-ST-ZIP

D
 KAVEY, WILLIAM
 6706 OAK HAMMOCK DRIVE
 BRADENTON FL 34202

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
 NATHANSON, ROGER
 4720 ACORN CIRCLE
 SARASOTA FL 34233

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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

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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

William Kavey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-5-02

Date

Daytime Phone #

941-923-8528

CR2E034 (9/01)