

DOCUMENT # **P96000046451**

1. Entity Name
PHILIP CHAPPELL PAINTING CONTRACTORS, INC.

Principal Place of Business

**7217 NIMA COURT
ORLANDO FL 32835
US**

Mailing Address

**7217 NIMA COURT
ORLANDO FL 32835
US**

2. Principal Place of Business

3605 TAFT VINELAND ROAD

3. Mailing Address

3605 TAFT VINELAND RD

Suite, Apt. #, etc.

SUITE 100

Suite, Apt. #, etc.

SUITE 100

City & State

ORLANDO, FLORIDA

City & State

ORLANDO, FLORIDA

Zip

32824

Country

USA

Zip

32824

Country

USA

6. Name and Address of Current Registered Agent

**CHAPPELL, PHILIP
7217 NIMA COURT
ORLANDO FL 32835**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

SIGNATURE

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

(NOTE: Registered Agent must sign for corporation which is registering)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **CHAPPELL, PHILIP**
STREET ADDRESS **7217 NIMA COURT**
CITY-ST-ZIP **ORLANDO FL 32835**

TITLE **D** ☐ Delete
NAME **CHAPPELL KAREN**
STREET ADDRESS **7217 NIMA COURT**
CITY-ST-ZIP **ORLANDO, FL 32835**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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:

Philip Chappell
Karen Chappell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/00

(407) 578-1061

Date Signature Phone

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 NOV -2 PM 5:15



DO NOT WRITE IN THIS SPACE

(2)

PHILIP CHAPPELL PAINTING CONTRACTORS, INC.
365 TAFT VINELAND RD, STE 100, ORLANDO, FL. 32824
TELEPHONE (407) 578-1061/(407) 812-7023
FAX (407) 812-7023

October 26, 2000

Florida Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Philip Chappell Painting Contractors, Inc.
Document No. P96000046451

To Whom It May Concern;

We are responding to notice of Administrative Dissolution or Revocation.
We disagree with your findings.

We are enclosing a copy of the original filed Uniform Business Report for the year of 2000. This report was originally filed back in April of 2000. As you will notice we change our address and added another Director. We have not received any late notices or other correspondence from the State concerning this matter.

We are enclosing a check for the amount due as of April in the amount of \$150.00 and ask that the penalties in this matter be abated.

If you are in need of any other information please contact us.

Sincerely yours,



Karen Chappell
Director