2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jul 05, 2000 8:00 am
Secretary of State
05-22-2000 90066 006 ***150.00

DOCUMENT # P96000066745

R

1. Entity Name

MATTHEW'S STUCCO & PLASTERING, INC.

Principal Place of Business	Mailing Address
1906 40TH TERR SW NAPLES FL 34116 US	1906 40TH TERR SW NAPLES FL 34116-6018 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1906, 40th Ter. SW Suite, Apt. #, etc.	1906, 40 Ter. SW Suite, Apt. #, etc.
City & State: Naples Fl	City & State: Naples Fl
Zip: 34116 Country:	Zip: 34116 Country:

4. FEI Number: 65-0694327 ☐ 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
STEAWRT, JAMES C JR 2121 COUNTY RD 951, SUITE 101 GOLDEN GATE FL 34116-6543	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	D MATTHE, TIMOTHY F 1739 55TH TERRACE SW NAPLES FL 34116	☐ Delete	MATTHEW, KINSLEY (Vice President) 670, 6th ST. N.E Naples, Florida 34120	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MATTHEW, SABINE 1739 55TH TERRACE SW NAPLES FL 34116	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MATTHEW, HENRICK 1739 55TH TERRACE SW NAPLES FL 34116	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MATTHEW, LEONA 1739 55TH TERRACE SW NAPLES FL 34116	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Kinsley C. Matthew Vice President 4/28/00 (941) 455-4200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #