

2001 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **P 960000 70378**

Entity Name

LESTER Holland Custom Wood Furniture, Inc.**FILED**

Principal Place of Business

Mailing Address

01 JUL 24 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**1181 SUN CENTURY ROAD
NAPLES, FL 34110****1181 SUN
NAPLES,**

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

59-3411447
**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LESTER Holland
1181 SUN CENTURY ROAD
NAPLES, FL 34110**

Name

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

City

FL

Zip Code

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 fee if applicable.

(NOTE: Registered Agent's signature required when renewing)

DATE

This corporation is eligible to elect to be an S corporation.
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

12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

FILE
NAME
Holland, LESTER
STREET ADDRESS
1181 SUN CENTURY ROAD
CITY-STATE-ZIP
NAPLES, FL 34110☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ AdditionFILE
NAME
Holland, Brenda
STREET ADDRESS
1181 SUN CENTURY ROAD
CITY-STATE-ZIP
NAPLES, FL 34110☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ AdditionFILE
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CITY-STATE-ZIP☐ DeleteTITLE
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CITY-STATE-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ Addition

I, the undersigned, 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 individual 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 amendment with an address, with all other data as required.

SIGNATURE:

Lester Holland per.**7/5/01 941-597-7662**

LESTER HOLLAND

7/5/01

Payer

CUSTOM WOOD FURNITURE, INC.

1181 Sun Century Road

Naples, Florida 34110

(941) 597-7661

Fax (941) 597-7662

Hello

We did not get The notice to
pay in January. I called & spoke
to Carol. She said I could down

load a Form: As you can see I
could not. I Am sending you in
good faith payments for both

Hester Holland Building Corp - L31035
&

Hester Holland Custom Wood Furniture Inc
- P96000070378

I also put in our report from
year 2000 to show that we
do pay on time.

Waiting for your reply

Brenda Holland

Holland Brenda @ AOL.com

941.597.7662 - phone & fax