2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State
04-06-2001 90017 031 ***163.75

DOCUMENT # P96000076447

1. Entity Name
T&D PAINTING & DECORATING, INC.

Principal Place of Business
2228 DUNCAN TRAIL
CLERMONT FL 34711

Mailing Address
2228 DUNCAN TRAIL
CLERMONT FL 34711

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 144 Sela Ct
Suite, Apt. #, etc.

3. Mailing Address: 144 Sela Ct.
Suite, Apt. #, etc.

City & State: Davenport, Florida
Zip: 33837 Country: USA

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Zip: 33837 Country: USA

4. FEI Number 59-3397795 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PASSERELLO, THOMAS A III
2228 DUNCAN TRAIL
CLERMONT FL 34711

7. Name and Address of New Registered Agent
Name: Passerello, Thomas A III
Street Address (P.O. Box Number is Not Acceptable): 144 Sela Ct
City: Davenport, Florida FL Zip Code: 33837

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: Thomas A. Passerello III 4/4/01
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 $150.00
After MAY 1, 2001 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	PT ☐ Delete	TITLE	PT ☑ Change ☐ Addition
NAME	PASSERELLO, THOMAS A	NAME	Passerello, Thomas A
STREET ADDRESS	2228J DUNCAN TRAIL	STREET ADDRESS	144 Sela Ct
CITY-ST-ZIP	CLERMONT FL	CITY-ST-ZIP	Davenport, Florida 33837
TITLE	D ☐ Delete	TITLE	D ☑ Change ☐ Addition
NAME	PASSERELLO, MICHAEL	NAME	Passerello, Michael
STREET ADDRESS	2238 PINK GRAPEFRUIT TRAIL	STREET ADDRESS	343 Via Mariel Dr.
CITY-ST-ZIP	CLERMONT FL 34711	CITY-ST-ZIP	Davenport, Florida 33837
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (10/00)

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: Thomas A. Passerello III Thomas A. Passerello III PT 4/4/01 352-406-1706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #