FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 06, 2001 8:00 am Secretary of State DOCUMENT # P96000082889 POLY VINYL CREATIONS, INC. 04-06-2001 90031 028 \*\*\*158.75 Principal Place of Business Mailing Address 11313 HWY 52 11313 HWY 52 HUDSON FL 34669 ロリひろとろとふ HUDSON FL 34669 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3408466 Not Applicable Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BACON, DAVID A ESQ Street Address (P.O. Box Number is Not Acceptable) 2959 FIRST AVE N ST PETERSBURG FL 33713 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (10/00) TITI F Change TITLE ☐ Delete PTD BURTON, ROBERT L NAME NAME BURTON, ROBERT L STREET ADDRESS STREET ADDRESS 5298 16TH AVE N 5298 16TH AVE N ST PETERSBURG FL 33710 CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG, FL 33710 TITLE ☐ Delete TITLE BURTON, ELLEN H NAME NAME BURTON, ELLEN H STREET ADDRESS STREET ADDRESS 5298 16TH AVE N 5298=16th-AVE N CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33710 ST PETERSBURG, FL 33710 TITLE TITI F ☐ Change ☐ Addition Delete SCHWANKOFF, JAMES NAME NAME STREET ADDRESS **1900 34TH STREET SO** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33711 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition 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 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: ELLEN H BURTON CUlen USuch 4-3-01 727 321-166
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Phone #