

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000001176

1. Entity Name

ARCHITECTURAL WINDOW & DOOR, INC.

**FILED**  
**Feb 01, 2000 8:00 am**  
**Secretary of State**

02-01-2000 90031 022 \*\*\*150.00

Principal Place of Business

7550 WOODLAND BEND CIR  
FORT MYERS FL 33912  
US

Mailing Address

7550 WOODLAND BEND CIR  
FORT MYERS FL 33928-0159  
US

2. Principal Place of Business

21567 Belhaven Way  
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 159  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Estero, FL

City & State

Estero, FL

4. FEI Number

59-3417181

Applied For

Not Applicable

Zip

33928

Country

USA

Zip

33928

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOLING, JAMES J  
7550 WOODLAND BEND CIRCLE  
FORT MYERS FL 33912

7. Name and Address of New Registered Agent

Name

Same

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

21567 Belhaven Way

City

Estero

FL

Zip Code

33928

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

*James M. Boling*

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

(NOTE: Registered Agent signature required when reinstating)

1/26/00

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, 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

TITLE VPS ☐ Delete  
NAME BOLING, NANCY  
STREET ADDRESS 7550 WOODLAND BEND CIRCLE  
CITY-ST-ZIP FORT MYERS FL 33912

TITLE D ☐ Delete  
NAME BOLING, JAMES M  
STREET ADDRESS 7550 WOODLAND BEND CIRCLE  
CITY-ST-ZIP FORT MYERS FL 33912

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 same ☒ Change ☐ Addition  
NAME 21567 Belhaven Way  
STREET ADDRESS Estero, FL 33928  
CITY-ST-ZIP

TITLE same ☒ Change ☐ Addition  
NAME 21567 Belhaven Way  
STREET ADDRESS Estero, FL 33928  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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:

*Nancy Boling, Vice President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/00

DATE

941-454-5806

Daytime Phone #