## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT #**

P97000005203

1. Entity Name

GROUTWORKS, INC.



**FILED** Mar 26, 2003 8:00 am § Secretary of State

03-26-2003 90159 022 \*\*\*150.00



				SOWE					
Principal Place of Business 3350 ULMERTON RD., #23 CLEARWATER FL 33762		Mailing Address 3350 ULMERTON RD #23 CLEARWATER FL 33762			4				
2. Principal F	Place of Business 15 10 th ave N. #, etc.	3. Mailing Address  Suite, Apt. #, etc.			) INDINE III INII INII INII INII INII INI				
City & Star	water, FL	City & State Clearwater, FL		4. FEI Number 59-3424529 Applied For Not Applicable					
337 L	a Country U.S.	ラシフ しゅ	Country	S.	5. Certificate of Status Desir	Fed L Fe	<b>3.75</b> Addi e Required		
	6. Name and Address of Current	Registered Agent			7. Name and Address of N	ew Registered Age	ent		
BEYER, DAVID A C/O RUDNICK & WOLFE				Name Street Address (P.O. Box Number is Not Acceptable)					
101 EAST KENNEDY SUITE 2000									
TAMPA FL 33602			Ci	ty	FL Zip Code				
	named entity submits this statement for ions of registered agent.	·		nce or register		DATE	illiar witti, a		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					9. Election Campaig Trust Fund Contril			May Be to Fees	
10.	OFFICERS AND	DIRECTORS	11.	1	ADDITIONS/CHANGES TO	OFFICERS AND D	IRECTORS	IN 11	
TITLE" NAME STREET ADDRESS CITY-ST-ZIP	P TIM P WILSON 14110 SPOONBILL LANE CLEARWATER FL 33762	☐ Delete	TITLE NAME STREET ADO CITY-ST-ZO		·		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILSON, DEBBIE 14110 SPOONBILL LANE CLEARWATER FL-33762 —	Delete	TITLE NAME STREET ADD CITY-ST-ZI		÷		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WILSON, RANDY 10500 JUMPER LANE CARMEL IN 46032	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI				] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Wilson, Steve 2033 79th Street N.W. Bradenton Fl 34209	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	l l			] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	1			] Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADD	DRESS			Change	Addition	

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

**SIGNATURE:**