

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2000 8:00 am  
Secretary of State

04-24-2000 90089 008 \*\*\*150.00

DOCUMENT # P97000016419

1. Entity Name  
EVERLY'S FLOORING, INC.

Principal Place of Business  
167 WILDWOOD DRIVE  
SANFORD FL 32773  
US

Mailing Address  
167 WILDWOOD DRIVE  
SANFORD FL 32773-5572  
US

2. Principal Place of Business  
106 BLUE SPRUCE CT  
Suite, Apt. #, etc.

3. Mailing Address  
106 BLUE SPRUCE CT  
Suite, Apt. #, etc.

City & State  
SANFORD, FL

Zip Country  
32773 US

4. FEI Number 59-3430111  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

EVERLY, KYLE  
167 WILDWOOD DRIVE  
SANFORD FL 32773

## 7. Name and Address of New Registered Agent

Name  
EVERLY, KYLE  
Street Address (P.O. Box Number is Not Acceptable)  
106 BLUE SPRUCE CT  
City SANFORD FL Zip Code 32773

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]* Kyle Everly PSTD 4-17-00  
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, 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
EVERLY, KYLE R  
167 WILDWOOD DRIVE  
SANFORD FL 32773 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
EVERLY, KYLE R  
106 BLUE SPRUCE CT  
SANFORD, FL 32773 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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: *[Signature]* 4-17-00 (407)330-2907  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)