

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90084 019 ***150.00

DOCUMENT # P97000046359

1. Entity Name

CLOSET CLASSICS OF EMERALD COAST, INC.

Principal Place of Business

132 MARKET STREET
SANTA ROSA BEACH FL 32459

Mailing Address

132 MARKET STREET
SANTA ROSA BEACH FL 32459

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0756226

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUBER, GARETT T
157 B KENAI CIRCLE
SANTA ROSA BEACH FL 32459

Name Garrett Huber

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

132 Market St.

City Santa Rosa Beach

FL

Zip Code 32459

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 Garrett Huber President 2-1-01

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 P ☒ Delete
NAME HUBER, LLOYD W
STREET ADDRESS 323 FAIRWAY DR
CITY-ST-ZIP NEW ORLEANS LA 70124

TITLE P ☒ Change ☐ Addition
NAME Garrett Huber
STREET ADDRESS 132 Market Street
CITY-ST-ZIP Santa Rosa Beach, FL 32459

TITLE VP ☐ Delete
NAME HUBER, GARETT T
STREET ADDRESS 157 B KENAI CIR
CITY-ST-ZIP SANTA ROSA BEACH FL 32459

TITLE ☐ Change ☐ Addition
NAME ~~Garrett Huber~~
STREET ADDRESS ~~132 Market St~~
CITY-ST-ZIP

TITLE S ☒ Delete
NAME HUBER, CHERYL P
STREET ADDRESS 323 FAIRWAY DR
CITY-ST-ZIP NEW ORLEANS LA 70124

TITLE S ☒ Change ☐ Addition
NAME Cheryl Huber
STREET ADDRESS 323 Fairway Dr.
CITY-ST-ZIP New Orleans La 70124

TITLE T ☒ Delete
NAME HUBER, GRANT A
STREET ADDRESS 93 MAGNOLIA CREEK RD
CITY-ST-ZIP SANTA ROSA BEACH FL 32459

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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: Garrett Huber President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-01

Date

850-622-1302

Daytime Phone #

CR2E034 (10/00)