

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

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90348 044 ***150.00

DOCUMENT #

P97000064053

1. Entity Name

Chris Matincheck Plumbing, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

300 Hatley Drive

3. Mailing Address

P.O. Box 13793

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Mexico Beach, FL

City & State

Mexico Beach, FL

4. FEI Number

59-3545962

Applied For

Not Applicable

Zip

32410

Country

USA

Zip

32410

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Chris Matincheck, Sr.

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

300 Hatley Drive

~~Mexico Beach~~

City

Mexico Beach

FL

Zip Code

32410

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 Chris Matincheck, Sr. (PS) x

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

(NOTE: Registered Agent signature required when reinstating)

4/26/02

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
PS
Matincheck, Chris Sr.
300 Hatley Drive
Mexico Beach, FL 32410

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
Charles Thursbay
193 Mossie Road
Wewahitchka, FL 32456

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Treasurer
Sidney Harris
119 Harbor Street
Port St. Joe, FL

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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 on an attachment with an address, with all other like empowered.

SIGNATURE: Chris Matincheck, Sr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02

Date

(850) 648-8585

Daytime Phone #