2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P97000090748

1. Entity Name

LAKE COUNTY PAINTING & WATERPROOFING, INC.



FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90069 024 ***150.00

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Principal Place of Business 21648 DAIRY RD EUSTIS FL 32736 US			21648	Mailing Address 21648 DAIRY RD EUSTIS FL 32736 US								
2. Principal F	Place of Busines	S-C	=≥= :3;=Mai	Ing Address				######################################			IKOTI HAKI KODI	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	City & State				4. FEI Number 59-3474525 Applied For Not Applicable				
Zip Country			Zip	Zip Count				5. Certificate of Status Desired \$8.75 Additional Fee Required			ditional	
6. Name and Address of Current R				Registered Agent			7. Name and Address of New Registered Agent					
			n riugiotore	go		Name		· Hame and Address of New Tree	Jistereu Age			1
Hunihan, Stephen R 21648 Dairy RD							Street Address (P.O. Box Number is Not Acceptable)					
Eustis F	L 32726											
									FL	Zip Cod		
8. The above the obligat	e named entity si tions of registere	ubmits this statement d agent.	for the purp	ose of changing its	registere	ed office or r	egistered	agent, or both, in the State of Florid	da. I am fam	iliar with,	and accept	
SIGNATURE.	Signature, typed or p	rinted name of registered agei	nt and title if appl	icable. (NOTE	: Registere	d Agent signature	required whe	en reinstating)	DATE			
	n-E-Nown-			·								
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of S								 Election Campaign Finar Trust Fund Contribution. 	ncing	\$5.0 Added	0 May Be I to Fees	
	R Payable to F											
10.		OFFICERS AN	D DIRECTO	RS	11.			ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTORS	3 IN 11]_
TITLE	PTD			☐ Delete	TITLE				**	Change	☐ Addition	CR2E034 (10/02)
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TITLE	VSD			☐ Delete	TITLE					Change	Addition	22
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR