

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000090785

1. Entity Name

MARQUIS HOME SERVICES, INC.

FILED

May 01, 2000 8:00 am
Secretary of State

05-01-2000 90313 045 ***150.00

Principal Place of Business

Mailing Address

% 13400 S. CLEVELAND AVE., SUITE 203
FT. MYERS FL 33907

% 13400 S. CLEVELAND AVE., SUITE 203
FT. MYERS FL 33907

2. Principal Place of Business

3. Mailing Address

3675 LIBERTY SQUARE

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT MYERS FL

City & State

FT MYERS FL

Zip

33908

Country

USA

Zip

33908

Country

USA

4. FEI Number

65-0789963

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

STILPHEN, PETER A
13400 S. CLEVELAND AVE., SUITE 203
SUITE 100
FT. MYERS FL 33907

Name

STILPHEN, PETER A

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

3675 LIBERTY SQUARE

City

FT MYERS

FL

Zip Code

33908

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

Peter A Stilphen

PETER A STILPHEN

4/18/00

Signature, typed or printed name of registered agent and file 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST
NAME STILPHEN, PETER
STREET ADDRESS 13400 S CLEVELAND AVE
CITY-ST-ZIP FT MYERS FL 33907 ☐ Delete

TITLE PLS/T/D
NAME STILPHEN, PETER
STREET ADDRESS 3675 LIBERTY SQUARE
CITY-ST-ZIP FT MYERS, FL 33908 ☒ Change ☐ Addition

TITLE VSTD
NAME STILPHEN, PETER
STREET ADDRESS 9400 GLADIOLUS DR #100
CITY-ST-ZIP FT MYERS FL 33908 ☒ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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:

Peter A Stilphen

PETER A STILPHEN

Date

Daytime Phone #

941-4554
5831