

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 18, 2001 8:00 am**  
**Secretary of State**

07-18-2001 90006 037 \*\*\*150.00

0100853 AV

**DOCUMENT # P98000002263**

1. Entity Name  
**PAINTWORKS, INC.**

Principal Place of Business  
**10173 BRIAR CIRCLE**  
**BAYONET POINT FL 34667**

Mailing Address  
**10173 BRIAR CIRCLE**  
**BAYONET POINT FL 34667**

**C0073504**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3487772**

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

**VAN BUMBLE, ROXANNE**  
**10173 BRIAR CIRCLE**  
**BAYONET POINT FL 34667**

Name

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

City

**FL**

Zip Code

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: *Roxanne Van Bumble*

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

(NOTE: Registered Agent signature required when reinstating)

DATE **7/15/01**

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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 **V** ☐ Delete  
 NAME **VAN BUMBLE, ROXANNE**  
 STREET ADDRESS **10173 BRIAR CIRCLE**  
 CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE **P** ☐ Delete  
 NAME **VANBUMBLE, SCOTT**  
 STREET ADDRESS **10173 BRIAR CIRCLE**  
 CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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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: *Roxanne Van Bumble*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/15/01 727-802-3512**

Date

Daytime Phone #

CR2E034 (5/01)

*Attachment*

To Whom It May Concern,

DOC # 19800002263 - C007354  
July 10, 2001

I mailed out the 2001 Uniform Business Report in the beginning of April. I assumed that you had received it, until I received a second notice form in the mail. When I called your office, I was told to fill out the second notice and send it in with a letter of explanation, along with a new a check for \$150.00. I am assuming that the original form was lost in the mail. That check has not cleared my bank, and you show no record of ever receiving it. Thank you for waiving the late fees. I truly appreciate it!

Thank You,

*Roxann M VanZumbel*

Paintworks, Inc. 59-3487772  
10173 Briar Circle  
Bayonet Point, Fl 34667  
(727)862-3512

10/11/01 10:00 AM  
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