

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000008661

1. Entity Name

SOUTHEASTERN DOOR AND METAL SERVICES, INC.

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90051 005 ***150.00

Principal Place of Business

1905 OYSTER CATCHER LANE SUITE 911
CLEARWATER FL 33762

Mailing Address

1905 OYSTER CATCHER LANE SUITE 911
CLEARWATER FL 33762-5572

00039830



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4100 Floramar Ter
Suite, Apt. #, etc.

3. Mailing Address

4100 Floramar Ter
Suite, Apt. #, etc.

City & State

New Port Richey, FL

City & State

New Port Richey, FL

4. FEI Number

59-3490714

Applied For

Not Applicable

Zip

34652

Country

Pasco

Zip

34652

Country

Pasco

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HENDLEY, DENISE
1905 OYSTER CATCHER LN #911
CLEARWATER FL 33762

7. Name and Address of New Registered Agent

Name Denise R. Hendley
Street Address (P.O. Box Number is Not Acceptable)
4100 Floramar Terrace
City New Port Richey FL Zip Code 34652

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

Denise R. Hendley, Denise Hendley, Secretary/Treas
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 3-14-00

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

TITLE	D	<input type="checkbox"/> Delete
NAME	FOWLER, JOHN	
STREET ADDRESS	1905 OYSTER CATCHER LANE SUITE 911	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HENDLEY, DAVID	
STREET ADDRESS	1905 OYSTER CATCHER LANE SUITE 911	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	Do not know why	<input type="checkbox"/> Delete
NAME	I wasn't listed	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	David Hendley	
STREET ADDRESS	4100 Floramar Terrace	
CITY-ST-ZIP	New Port Richey, FL 34652	
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John Fowler	
STREET ADDRESS	104 S. Himes Ave.	
CITY-ST-ZIP	Tampa, FL 33609	
TITLE	Secretary/Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Denise Hendley	
STREET ADDRESS	4100 Floramar Terrace	
CITY-ST-ZIP	New Port Richey, FL 34652	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Denise R. Hendley, Denise Hendley, Sec./Treas. 3-14-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 3-14-00