

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053730

1. Entity Name  
STONEWORKS BY WILSON, INC.

Principal Place of Business

8601 WAUCHULA ROAD  
MYAKKA CITY FL 34251

Mailing Address

8601 WAUCHULA ROAD  
MYAKKA CITY FL 34251

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0887395

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WILSON, D. CAROL  
8601 WAUCHULA ROAD  
MYAKKA CITY FL 34251

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title 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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. 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 PD  
NAME WILSON, D. CAROL  
STREET ADDRESS 8601 WAUCHULA RD  
CITY-ST-ZIP MYAKKA CITY FL 34251 ☐ Delete

TITLE V  
NAME BOZARTH, BRYAN C  
STREET ADDRESS 2709 40TH ST. W.  
CITY-ST-ZIP BRADENTON FL 34205 ☒ Delete

TITLE S  
NAME WILSON, LESLIE  
STREET ADDRESS 3204 51ST AVE. TER. W.  
CITY-ST-ZIP BRADENTON FL 34207 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE V  
NAME Bautista, Antonio  
STREET ADDRESS 661 13th St. W Apt. #4  
CITY-ST-ZIP Palmetto, FL 34221 ☒ Change ☐ Addition

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

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

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

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:

*Deborah Wilson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-12-00

Date

(941) 322-8780

Daytime Phone #

FILED  
Sep 15, 2000 8:00 am  
Secretary of State

09-15-2000 90008 027 \*\*\*550.00

80106824



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)