

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

01-21-2003 90559 011 ***158.75

DOCUMENT # P98000092458

1. Entity Name
A-1 STUCCO AND STONE, INC.



Principal Place of Business
350 WINDWARD PASSAGE
CLEARWATER FL 33767

Mailing Address
350 WINDWARD PASSAGE
SUITE 600
CLEARWATER FL 33767

2. Principal Place of Business
13317 M. Henbane
Suite, Apt. #, etc.

3. Mailing Address
13317 M. Henbane
Suite, Apt. #, etc.

City & State
Springhill FL
Zip
34609
Country
Hernando

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Springhill FL
Zip
34609
Country
Hernando

4. FEI Number **59-3539836**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

SIMS, LARRY
350 WINDWARD PASSAGE
CLEARWATER FL 33767

7. Name and Address of New Registered Agent

Name **Michael F Deneweth**
Street Address (P.O. Box Number is Not Acceptable)
13317 M. Henbane
City **Springhill** **FL** **Zip Code** **34609**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Michael S Deneweth**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003, Fee will be \$550.00.
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIMS, LARRY 670 ISLAND WAY SUITE 600 CLEARWATER FL 33767 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Michael F Deneweth 13317 M. Henbane Springhill FL 34609 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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: **Michael F Deneweth**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 17-03 **727-639-3743**
Date **Daytime Phone #**

CR2E034 (10/02)