

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2003 8:00 am
Secretary of State

08-18-2003 90168 050 ***150.00

DOCUMENT # P98000106484

1. Entity Name
CLASSIC KOOL DECKS, INC.



Principal Place of Business
**373 OSOWAW BLVD.
SPRING HILL FL 34607**

Mailing Address
**373 OSOWAW BLVD.
SPRING HILL FL 34607**

55055419



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3570984**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**AMMONS, VICTOR
373 OSOWAW BLVD.
SPRING HILL FL 34607**

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D AMMONS, VICTOR**
STREET ADDRESS **373 OSOWAW BLVD.**
CITY-ST-ZIP **SPRING HILL FL 34607**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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:

SIGNATURE REQUIRED

Victor Ammons
Victor Ammons

8/25/03
352
688-2264

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

55055419
[REDACTED]
P98000106284

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Victor Ammons
373 Osowaw Blvd
Spring Hill, FL 34607

Dear Sir/Madam,

I am distressed to see that my Uniform Business Report is now \$550.00. I called my accountant to see why the fee had increased substantially and was informed by him that I must not have replied to the first notice, which had the fee of \$150.00.

I did not receive any prior notices of this year 2003 Uniform Business Report. The corporation mail arrives at my residence, which is on an isolated road, so I may have had my mail tampered with. In any case, no prior report arrived.

I am enclosing a check for \$150.00, which I would like you to accept, and treat this filing as the first notice timely filed. I think this would be a fair thing to do, since I was unaware that I owed any money and would have gladly paid the amount due.

Thank you for your cooperation.

Victor Ammons