

2000 UNIFORM BUSINESS REPORT (UBR)

3/

FILED

May 04, 2000 8:00 am
Secretary of State

03-22-2000 90009 025 ***150.00

DOCUMENT # P99000003689

1. Entity Name

NORM'S AUTO GLASS, INC.

Principal Place of Business

1515 10TH STREET WEST
BRADENTON FL 34205

Mailing Address

1515 15TH STREET WEST
BRADENTON FL 34205-6515

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

1515-10TH ST W.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

05-0885233

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DORIS A. BUNNELL, P.A.
608 15TH STREET WEST
BRADENTON FL 34205

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 \$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/P/S**
NAME **NORMAN KLOOSTER**
STREET ADDRESS **12220 WINDING WOODS WAY**
CITY-ST-ZIP **BRADENTON FL 34202**

☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

Norman Klooster
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-2000

Date

Daytime Phone #

CR2E034 (9/99)