FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jul 12, 2001 8:00 am Secretary of State P99000005750 **DOCUMENT #** 1. Entity Name 07-12-2001 90001 025 ***550.00 WASHINGTON STUCCO & STONE, INC. Principal Place of Business Mailing Address 501 S. DISSTON AVE. 501 S. DISSTON AVE. Alinappeo TARPON SPRINGS FL 34689 **TARPON SPRINGS FL 34689** 2. Principal Place of Business 3. Mailing Address 2469 Enterprise Road <u> 2469 Enterprise Road</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite C Suite C City & State City & State 4. FEI Number Applied For 59-3554338 Clearwater Not Applicable Clearwater Florida Zip Country \$8.75 Additional 5. .. Certificate of Status Desired ~USA~ ÷33763⊤ USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TINGIRIDES, STAVROS ESQ. Street Address (P.O. Box Number is Not Acceptable) 2469 ENTERPRISE ROAD STE. B **CLEARWATER FL 33763** City 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE **XX**Change ☐ Addition ☐ Delete TITLE NAME WALTERS, WASHINGTON NAME 501 S. DISSTON AVE. 2469 Enterprise Road, Suite C STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-ZIP Clearwater, Florida 33763 ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition ☐ Delete ☐ Channe NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplied to the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of 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 of the corporation or the re changed, or on an attachn

Washington Walters, President July 9. 2001