

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000008801

1. Entity Name

HANLON ACOUSTICAL CEILINGS, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90242 011 ***150.00

Principal Place of Business

Mailing Address

334 E LAKE ROAD STE 260
PALM HARBOR FL 34685

334 E LAKE ROAD STE 260
PALM HARBOR FL 34685-2427

2. Principal Place of Business

3. Mailing Address

3780 TAMPA ROAD

3780 TAMPA ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE 107

STE 107

City & State

OLDSMAR, FL

City & State

OLDSMAR, FL

Zip

34677

Country

U.S.A.

Zip

34677

Country

U.S.A.

4. FEI Number

59-3554468

Applied For

Not Applicable

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

HALL, JOHN A
334 E LAKE ROAD STE 260
PALM HARBOR FL 34685

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
P
VANITA HALL
110 GREENHAVEN TRAIL
OLDSMAR, FL 34677

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
JOHN A. HALL
110 GREENHAVEN TRAIL
OLDSMAR, FL 34677

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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 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:

JOHN A. HALL
VICE PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/00
Date

(813) 855 3913
Daytime Phone #

CR2E034 (9/99)