

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000023884

1. Entity Name  
ANYTHING CANVAS, INC.

**FILED**  
**Feb 28, 2001 8:00 am**  
**Secretary of State**

02-28-2001 90141 036 \*\*\*150.00

Principal Place of Business  
2441 BELLEVUE AVE.  
DAYTONA BEACH FL 32114

Mailing Address  
2441 BELLEVUE AVE.  
DAYTONA BEACH FL 32114

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
555 W Granada Blvd  
B-5  
City & State  
Ormond Beach FL  
Zip  
32174



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3564579  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
DIRECTOR BUSINESS CONSULTING  
1501 RIDGEWOOD AVE STE 206  
HOLLY HILL FL 32117

7. Name and Address of New Registered Agent  
Name  
Direct Business Consulting, Inc  
Street Address (P.O. Box Number is Not Acceptable)  
555 W. Granada Blvd Ste B5  
City  
Ormond Beach FL  
FL  
Zip  
32174

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, type or print 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, 2001 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	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HART, LARRY C		NAME		
STREET ADDRESS	930 CARSWELL AVE.		STREET ADDRESS		
CITY-ST-ZIP	HOLLY HILL FL 32117		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SWEENEY, BRIAN T		NAME		
STREET ADDRESS	930 CARSWELL AVE.		STREET ADDRESS		
CITY-ST-ZIP	HOLLY HILL FL 32117		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LOGUIDICE, JOE		NAME		
STREET ADDRESS	2441 BELLEVUE AVE.		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL 32114		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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 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:   
Signature, type or print name of signing officer or director Date (9/24/01-1000) Daytime Phone #

CR2E034 (10/00)