

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2002 8:00 am
Secretary of State

07-30-2002 90384 010 ***150.00

DOCUMENT # P99000025607

1. Entity Name
SOUTHERN CROSS PAINTING & HOME IMPROVEMENT, INC.

Principal Place of Business

**4026 RETFORD DR
 JACKSONVILLE FL 32225**

Mailing Address

**4026 RETFORD DR
 JACKSONVILLE FL 32225**

2. Principal Place of Business

6923 Gaillardia Rd.S.

3. Mailing Address

6923 Gaillardia Rd.S.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

Country

32211

DUVAL

Zip

Country

32211

DUVAL

6. Name and Address of Current Registered Agent

FINE, W. KERRY

11934 HARBOR COVE DR S

JACKSONVILLE FL 32225

4. FEI Number **59-3562205**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6923 Gaillardia Rd.S.

City

Jacksonville

FL

Zip Code

32211

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]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/27/02

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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 **PD** ☐ Delete

NAME **FINE, W K**
 STREET ADDRESS **4026 RETFORD DR**
 CITY-ST-ZIP **JACKSONVILLE FL 32225**

TITLE **SD** ☐ Delete

NAME **FINE, VICKI L**
 STREET ADDRESS **4026 RETFORD DR**
 CITY-ST-ZIP **JACKSONVILLE FL 32225**

TITLE ☐ Delete

NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete

NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete

NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete

NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME **6923 Gaillardia Rd.S.**
 STREET ADDRESS **Jacksonville, FL 32211**

TITLE ☒ Change ☐ Addition

NAME **6923 Gaillardia Rd.S.**
 STREET ADDRESS **Jacksonville, FL 32211**

TITLE ☐ Change ☐ Addition

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

TITLE ☐ Change ☐ Addition

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

TITLE ☐ Change ☐ Addition

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

TITLE ☐ Change ☐ Addition

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

CR2E034 (4/02)

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/27/02

904-743-3930

Attachment 7/27/02
P99000025607/676191

DIVISION OF CORPORATIONS

P.O. BOX 1500

TALLAHASSEE, FL 32302-1500

Dear Sir/Madam:

Please advise the additional fee of \$400.00. The corporation did not receive a prior notice. Attached is a copy of the mailing address label dated 07/09/02.

Enclosed is the UBR and a check for \$150.00 for the filing fee.

Thank you for your kind attention to this matter.

Respectfully,

W. K. Fine

W. Kerry Fine, President



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
FLORIDA DIVISION OF CORPORATION

4371

Attachment
#P99000025607/676191



File

TO: 000364H AU xXPU10 TS 1 1297 32225-367426
P99000025607
SOUTHERN CROSS PAINTING & HOME IMPROVEMENT, INC.
4026 RETFORD DR
JACKSONVILLE FL 32225-3674

FINE026 322252695 1A01 12 607/09/02
NOTIFY SENDER OF NEW ADDRESS
FINE
6923 GAILLARDIA RD S
JACKSONVILLE FL 32211-4174

