UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000037321

1. Entity Name
CHARLES FRISBIE INSTALLATIONS, INC.

FILED
May 01, 2003 8:00 am
Secretary of State
05-01-2003 90814 010 ***150.00

Principal Place of Business	Mailing Address
2608 S.W. MONTERREY LANE PORT ST. LUCIE FL 34953	2608 S.W. MONTERREY LANE PORT ST. LUCIE FL 34953

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0927944 — 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
FRISBIE, CHARLES 2608 S.W. MONTERREY LANE PORT ST. LUCIE FL 34953	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, 2002 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 PSD NAME FRISBIE, CHARLES STREET ADDRESS 2608 S.W. MONTERREY LANE CITY-ST-ZIP PORT ST. LUCIE FL 34953 ☐ Delete	TITLE NAME 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 in Block 6 or Block 7 if changed, or in Block 8 if empowered.

SIGNATURE: Charles Frisbie OFFICER OR DIRECTOR 04-28-03 Date 772-340-4536 Daytime Phone #