

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000050436

1. Entity Name

WEST VOLUSIA ACE MASONRY, INC.

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90014 050 ***150.00

Principal Place of Business

3301 COMMERCE AVENUE
DELTONA FL 32738

Mailing Address

3301 COMMERCE AVENUE
DELTONA FL 32738

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

59-3576934

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

WEYNAND, JAMES
3301 COMMERCE AVENUE
DELTONA FL 32738

7. Name and Address of New Registered Agent

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 \$550.00
After SEPTEMBER 13, 2000 Min. 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 ☐ Delete
NAME D WEYNAND, JAMES
STREET ADDRESS 3301 COMMERCE AVENUE
CITY-ST-ZIP DELTONA FL 32738

TITLE ☐ Delete
NAME D CALLAGHAN, DONALD R
STREET ADDRESS 3171 COURTLAND BLVD.
CITY-ST-ZIP DELTONA FL 32738

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-00

Date

(904) 405-4740

Daytime Phone #

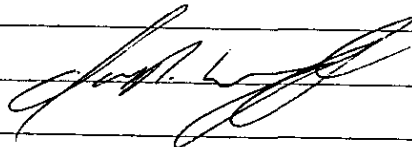
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A0068451

Didn't receive just
notice. We just
incorporated in
June of 99. So didn't
receive the just notice.

Please let me know
if amount ~~isn't~~
isn't correct.

Thanks



JAMES N. WEYNAND