

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90065 036 ***550.00

DOCUMENT # P99000050788

1. Entity Name
RANEW'S PAINTING, INC.

Principal Place of Business
221 GOLDEN GATE BLVD. WEST
NAPLES FL 34120

Mailing Address
221 GOLDEN GATE BLVD. WEST
NAPLES FL 34120



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
RANEW'S PAINTING, INC.

Suite, Apt. #, etc.
1885 Desoto Blvd. S.

City & State
NAPLES FL

Zip
34117

Country
Collier

3. Mailing Address
RANEW'S PAINTING, INC.

Suite, Apt. #, etc.
1885 Desoto Blvd. S.

City & State
NAPLES FL

Zip
34117

Country
Collier

4. FEI Number **59-3578126**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

STEWART, JAMES C JR.
11925 COLLIER BLVD.
STE 101
GOLDEN GATE FL 34116-6543

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. I am familiar with, and accept the obligations of registered agent.

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, 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 **D**
 NAME **RANEW, CHRISTOPHER K**
 STREET ADDRESS **221 GOLDEN GATE BLVD. WEST**
 CITY-ST-ZIP **NAPLES FL 34120**

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D**
 NAME **RANEW CHRISTOPHER K.**
 STREET ADDRESS **1885 DESOTO BLVD. S.**
 CITY-ST-ZIP **NAPLES FL 34117**

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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: Christopher K. Rane **CHRISTOPHER K. RANEW** **9-10-2002** **239-451-0036**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #