

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2002 8:00 am
Secretary of State

02-03-2002 90025 002 ***150.00

FORM 2002 AV

DOCUMENT # P99000053070

1. Entity Name

COATINGS FOR INDUSTRY, INC.

Principal Place of Business

1605 MAIN STREET STE 912
 SARASOTA FL 34236

Mailing Address

1605 MAIN STREET STE 912
 SARASOTA FL 34236



2. Principal Place of Business

5860 MIDNIGHT PASS RD 5900 S. TAMAMI TRAIL

3. Mailing Address

5900 S. TAMAMI TRAIL

Suite, Apt. #, etc.

UNIT #38

Suite, Apt. #, etc.

SUITE I

DO NOT WRITE IN THIS SPACE

City & State

Sarasota FL

City & State

Sarasota FL

4. FEI Number

65-0932046

Applied For

Not Applicable

Zip

34242

Country

USA

Zip

34231

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCOVILL, H W
 1605 MAIN STREET STE 912
 SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name CATHERINE L. ASTRONSKAS
 Street Address (P.O. Box Number is Not Acceptable) 5900 S. TAMAMI TRAIL
 Suite I
 City Sarasota FL Zip Code 34231

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 Catherine L. Astronskas

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

(NOTE: Registered Agent signature required when reinstating)

1-16-02

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

TITLE D
 NAME SONGINI, ROBERT A
 STREET ADDRESS 5860 MIDNIGHT PASS ROAD UNIT 38
 CITY-ST-ZIP SARASOTA FL 34242 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D/P/S/T
 NAME ROBERT A. Songini
 STREET ADDRESS 5860 MIDNIGHT PASS RD UNIT #38
 CITY-ST-ZIP Sarasota, FL 34242 ☒ Change ☐ Addition

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

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

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

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 CITY-ST-ZIP ☐ Change ☐ Addition

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

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

1/16/02

Date

9413493712

Daytime Phone #

CR2E034 (9/01)