₽

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000059284 1. Entity Name BARKER'S PAINT & DECORATING, INC.							•	FILED May 05, 2003 8:00 am Secretary of State 05-05-2003 91429 037 ***150.00		
Principal Place of Business 4039 MARINER BLVD SPRING HILL FL 34609			Mailing Address 4039 MARINER BLVD SPRING HILL FL 34609							
2. Principal F	Place of Busin	iess	3. Mailing Address						 	8111 8181 1 88 1
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State				4.	FEI Number 59-3585638		oplied For ot Applicable
Zip		Country	Zip		Coun	try	5.	Certificate of Status Desired	\$8.75 Add Fee Require	
	6. Name	and Address of Current	Registere	d Agent		Name	7. 1	Name and Address of New Registered	J Agent	
BARKER, RODNEY 5670 S. SHADY OAKS TERR. LECANTO FL 34461							(P.O. E	Box Number is Not Acceptable)		
.***	•					City		F	Zip Code	е
The above named entity submits this statement for the purpose of changing its registered office of the obligations of registered agent.						ed office or registe	red ag			and accept
SIGNATURE		ered agent. or printed name of registered agent a						einstatino) DATE		<u> </u>
F Afte	ILE NOW!! r May 1, 200	! FEE IS \$150.00 03 Fee will be \$550.00 05 Florida Department of		CADIE. (NOTE	: Hegistered	Agent signature require	o when r	S. Election Campaign Financing Trust Fund Contribution.	\$5.0	0 May Be I to Fees
10.		OFFICERS AND	DIRECTOR	RS	11.		ĀĒ	L DDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		[Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete					☐ Change	☐ Addition
TITLE NAME: - STREET ADDRESS CITY-ST-ZIP				☐ Delete		J			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	٠			☐ Delete	•				☐ Change	Addition
TITLE NAME STREET ADDRESS				☐ Delete	TITLE NAME STREE	ſ			☐ Change	☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP