

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000096531

1. Entity Name

UNITED GARAGE DOOR SERVICES, INC.

FILED

Jan 18, 2000 8:00 am  
Secretary of State

01-18-2000 90177 050 \*\*\*158.75

Principal Place of Business

Mailing Address

6158 TURNBURY PARK DR #1203  
SARASOTA FL 34243

6158 TURNBURY PARK DR #1203  
SARASOTA FL 34243-3199

2. Principal Place of Business

6158 Turnbury Park Dr.

3. Mailing Address

6158 Turnbury Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

# 1204

# 1204

City & State

SARASOTA, FL

City & State

SARASOTA, FL

4. FEI Number

65-0956988

Applied For

Not Applicable

Zip

34243

Country

USA

Zip

34243

Country

USA

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

HASTINGS, DAVID C  
11941 GULF BLVD #E  
INDIAN SHORES FL 33785

Name

Douglas J. Johns

Street Address (P.O. Box Number is Not Acceptable)

6158 Turnbury Park Dr. #1204

City

SARASOTA

FL

Zip Code

34243

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

1-10-00

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, 2000 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	PSTD	<input type="checkbox"/> Delete
NAME	JOHNS, DOUGLAS	
STREET ADDRESS	6158 TURNBURY PARK DR #1203	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	S/T/D	<input type="checkbox"/> Delete
NAME	INGRID JOHNS	
STREET ADDRESS	6158 Turnbury Park Dr. #1204	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Douglas J. Johns	
STREET ADDRESS	6158 TURNBURY PARK DR. #1204	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	S/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	INGRID JOHNS	
STREET ADDRESS	6158 Turnbury Park Dr. #1204	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-10-00 941-650-2938

CR2 014 1/18/00