

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V34348

1. Entity Name

MIKE GOTCHER'S CABINET & TRIM, INC.

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

04-20-2000 90026 012 ***150.00

Principal Place of Business

2818 COMMONWEALTH AVE.
VALRICO FL 33594

Mailing Address

C/O WLATER SANDERS
13910 N DALE MABRY STE 1
TAMPA FL 33618-2440
US

2. Principal Place of Business

P.O. Box 588

Suite, Apt. #, etc.

3. Mailing Address

3355 BEARSS Ave

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
East Tawas, Michigan

Zip
48730

Country

City & State
Tampa, Florida

Zip
33618

Country

4. FEI Number 59-3124167

Applied For

Not Applicable

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

SANDERS, WALTER
13910 N DALE MABRY
STE 1
TAMPA FL 33618

Name
WALTER SANDERS

Street Address (P.O. Box Number is Not Acceptable)
3355 BEARSS Ave

City
Tampa FL Zip Code
33618

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 *Walter Sanders* *Walter Sanders*

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

(NOTE: Registered Agent signature required when reinstating)

3/24/00

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GOTCHER, MIKE
2818 COMMONWEALTH AVE.
VALRICO FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Gotcher, Mike
P.O. Box 588
East Tawas, Michigan 48730 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GOTCHER, SUZANNE
2818 COMMONWEALTH AVE.
VALRICO FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Gotcher, Suzanne
P.O. Box 588
East Tawas, Michigan 48730 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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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: *Michael S. Gotcher* Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-00 (517) 362 9008

Date

Daytime Phone #

CR2E034 (9/99)