

Amended

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 OCT 18 PM 2: 35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S19602

1. Entity Name

Skilled Masonry, Tile, + Marble, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10570 Woodchuck Ln.

Suite, Apt. #, etc.

3. Mailing Address

10570 Woodchuck Ln.

Suite, Apt. #, etc.

City & State

Bonita Springs, FL

Zip

34135

Country

USA

City & State

Bonita Springs, FL

Zip

34135

Country

USA

4. FEI Number

65-0233962

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

100008702861
10/30/02--01076--025 **61.25

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Mark S. Crawford

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

10570 Woodchuck Lane

City

Bonita Springs

FL

Zip Code

34135

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 reappointing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☒
(See criteria on back)

January 1 - May 1 Fee is: \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY- ST- ZIP
P/T
Mark S. Crawford
10570 Woodchuck Lane
Bonita Springs, FL 34135

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
V/S
Sharon Crawford
10570 Woodchuck Lane
Bonita Springs, FL 34135

TITLE
NAME
STREET ADDRESS
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Mark S. Crawford - Mark S. Crawford - President 10/12/2002 239-498-2326

CR2E034B (12/01)