

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 719247**

1. Entity Name

C. SPELLMAN, INC.**FILED**
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90178 046 ****70.00

Principal Place of Business

Mailing Address

**3435 FISKE BLVD.
ROCKLEDGE FL 32955-4507****P.O. BOX 560531
ROCKLEDGE FL 32956-0531**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7184791

Applied For

☒ Not Applicable5. 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****LINK, ROBERT W JR.
800 SANDHILL CRANE COURT
ROCKLEDGE FL 32955**Name
DELA TORRE, DANIEL
Street Address (P.O. Box Number is Not Acceptable)
1718 SUN GAZER DR**Rockledge****FL**Zip Code
32955

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

Vinil Vellatone

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/02**FILE NOW: FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	P	<input type="checkbox"/> Delete
NAME	LINK, ROBERT W. JR	
STREET ADDRESS	800 SANDHILL CRANE CT	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	D	<input type="checkbox"/> Delete
NAME	CONTI, THOMAS A	
STREET ADDRESS	415 ROCKLEDGE DR	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	T	<input type="checkbox"/> Delete
NAME	CHANCE, STANLEY	
STREET ADDRESS	1725 CURLEW CT.	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	S	<input type="checkbox"/> Delete
NAME	TREMLETT, ALBERT	
STREET ADDRESS	715 JACARANDA ST.	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NEDELL, WALTER J	
STREET ADDRESS	1331 CALIFORNIA DRIVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PUGLISI, AL	
STREET ADDRESS	841A ANGELA AVE	
CITY-ST-ZIP	ROCKLEDGE FL 32955	

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAN DELA TORRE, DAN	
STREET ADDRESS	1718 SUN GAZER DR	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PITTMAN, ROBERT S.	
STREET ADDRESS	1241 WALNUT GROVE WAY	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	
TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHANCE, STANLEY	
STREET ADDRESS	1725 CURLEW CT	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LINK, ROBERT W, JR.	
STREET ADDRESS	800 SANDHILL CRANE CT	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PARMELEE, JAMES M	
STREET ADDRESS	1724 SUGAR CREEK LN	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUGLISI, AL	
STREET ADDRESS	841A ANGELA AVE	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stanley Chance
STANLEY CHANCE **4/18/02** **321-632-8781**

Date

Daytime Phone #

CR2E037 (9/01)