

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90631 049 ***150.00

DOCUMENT # P93 ~~44000~~ 2967

1. Entity Name
 Chapala Imports, Inc.

Principal Place of Business: 8118 NW 60th Ave. Ocala, FL 34482
 Mailing Address: 8118 NW 60th Avenue Ocala, FL 34482

0000J252

2. Principal Place of Business: 8118 NW 60th Ave
 Suite, Apt. #, etc.

3. Mailing Address: 8118 NW 60th Ave
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State: Ocala, FL

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4. FEI Number: 65-0381605
 Applied For: Not Applicable

Zip: 34482
 Country: USA

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5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 Ellen C. Knight
 8118 NW 60th Ave
 Ocala, FL 34482

7. Name and Address of New Registered Agent
 Name:
 Street Address (P.O. Box Number is Not Acceptable):
 City: FL Zip Code:

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: _____ (NOTE: Registered Agent signature required when reinstating) 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, 2001 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D. Ellen C. Knight	8118 NW 60th Ave	Ocala, FL 34482	<input type="checkbox"/>
	D. Lawrence E. Knight	8118 NW 60th Ave	Ocala, FL 34482	<input checked="" type="checkbox"/> Delete
	D. Susan Danvers	8118 NW 60th Ave	Ocala, FL 34482	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	William H. Hamilton, JR	5596 NW 65th Street	Ocala, FL 34482	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> 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: William H. Hamilton, Jr.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01 352-840-0075
 Date Daytime Phone #

CR2E034 (11/00)