

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90317 030 ***550.00

DOCUMENT # **P98000086066**

1. Entity Name

CJE RACING, INC.

Name Change: **CHRIS FONTAINE, INC.**



Principal Place of Business
**401 EAST JACKSON STREET #2650
TAMPA FL 33602**

Mailing Address
**401 EAST JACKSON STREET #2650
TAMPA FL 33602**

2. Principal Place of Business
401 E. Jackson Street

3. Mailing Address
401 E. Jackson Street

Suite, Apt. #, etc.

Suite 2400

Suite, Apt. #, etc.

Suite 2400

City & State
Tampa, Florida

City & State
Tampa, Florida

Zip
33602

Country
USA

Zip
33602

Country
USA

4. FEI Number **59-3547269**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**GARDNER, MERRITT A
401 EAST JACKSON STREET #2650
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name

Merritt A. Gardner

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

401 E. Jackson Street

Suite 2400

City

Tampa, Florida

FL

Zip Code
33602

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/4/2003

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **FONTAINE, GLENDA C**
STREET ADDRESS **5934 PIER PLACE DRIVE**
CITY-ST-ZIP **LAKELAND FL 33813**

TITLE **ST** ☐ Delete
NAME **ALBRIGHT, MARK**
STREET ADDRESS **4900 FRONTAGE ROAD SOUTH**
CITY-ST-ZIP **LAKELAND FL 33801**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **ST ALBRIGHT, MARK**
STREET ADDRESS **1501 Shepherd Road, No. 9**
CITY-ST-ZIP **Lakeland, Florida 33811**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-25-03

Date

863-640-9828

Daytime Phone #

CR2E034 (4/03)

Detachment

10111271

P98000086066

GARDNER, WILKES, SHAHEEN & CANDELORA

ATTORNEYS AT LAW

MERRITT A. GARDNER

2400 SUNTRUST FINANCIAL CENTRE
401 EAST JACKSON STREET
TAMPA, FLORIDA 33602

TELEPHONE (813) 221-8000
FACSIMILE (813) 229-1597
E-MAIL: MGARDNER@GWSC.COM

MAILING ADDRESS:
POST OFFICE BOX 1810
TAMPA, FLORIDA 33601-1810

September 4, 2003

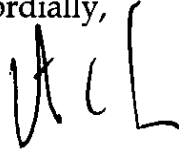
Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, Florida 23202-1500

Re: Chris Fontaine, Inc.

Dear Sir or Madam:

With respect to the above-referenced corporation, please find enclosed the 2003 Uniform Business Report and a check made payable to the Florida Department of State in the amount of \$550 to cover the prescribed filing fee.

Cordially,



Merritt A. Gardner

MAG/ww

Enclosures

Certified Mail No. 7002 2030 0006 7808 0221
Return Receipt Requested

cc: Mrs. Glenda C. Fontaine
Mr. Christopher J. Fontaine