

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 17, 2000 8:00 am
Secretary of State

08-17-2000 90104 018 ***558.75

DOCUMENT # S20910

1. Entity Name
CROWN RIDGE, INC.

Principal Place of Business
**1218 HWY 27 S
LAKE WALES FL 33853**

Mailing Address
**1218 HWY 27 S
LAKE WALES FL 33853**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3039504**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WELBORN, CHARLES P. JR.~~
**1220 HIGHWAY 27 SOUTH
LAKE WALES FL 33841**

Name **Wolford, Heather L.**
Street Address (P.O. Box Number is Not Acceptable)
1222 Hwy 27 South

City **Lake Wales**

FL

Zip **33853**

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 **Heather L. Wolford, Vice-President**

8/14/2000

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	PD WELBORN, CHARLES P. 1220 US HIGHWAY 27 SOUTH LAKE WALES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WELBORN, SUSAN L. 1220 US HWY 27 SOUTH LAKE WALES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Wolborn, Charles P. 361 Lake Avenue Babson Park, FL 33827	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Wolborn, Susan L. 361 Lake Avenue Babson Park, FL 33827	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT WOLFORD, HEATHER L. 1222 HWY 27 SOUTH Lake Wales, FL 33853-8157	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO WOLFORD, AARON D. 1222 HWY 27 SOUTH Lake Wales, FL 33853-8157	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS 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: **Heather L. Wolford, Vice-President**

8/14/2000

(800) 413-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)