UNIFORM BUSINESS REPORT (UBR)

1062

DOCUMENT # P97000096060

1. Entity Name: Chelmsford Group Inc.

FILED
00 SEP 26 AM 9:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
5840 NW 122nd Dr Coral Springs, FL 33076	5840 NW 122nd Dr Coral Springs, FL 33076

DO NOT WRITE IN THIS SPACE

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: 65-0794254 ☐ Applied For ☐ Not Applicable

5. 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
DOUG FORDE 1440 CORAL RIDGE DRIVE #313 CORAL SPRINGS, FL 33071	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 _____
Signature, typed or printed name of registered agent and title if applicable. (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, 2000 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PS MICHELLE MICHALOW 5840 NW 122nd DR CORAL SPRINGS, FL 33076	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DOUG FORDE 5840 NW 122nd Dr CORAL SPRINGS, FL 33076	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 000003416290--9 -10/06/00--01024--006 ****150.00 ****150.00
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CR2E034 (9/99)

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: Michelle J Michalow Michelle J. Michalow 9/21/00 954-341-6635
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Chelmsford Group, Inc.

5840 NW 122nd Drive
Coral Springs, FL 33076
Phone: (954) 341-6635

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September 11, 2000

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

I did not receive the form necessary to renew my corporation "Chelsmford Group, Inc." FEI Number 65-0794254.

I am enclosing my personal check number 0178 in the amount of $150.00 for the renewal for the year 2000.

Sincerely,

Michelle J Michalow

Michelle J. Michalow
President