

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 160673****1. Entity Name**
CHASTAIN-SKILLMAN, INC.**Principal Place of Business**
4705 OLD HWY. 37
P.O. BOX 5710
LAKELAND FL 33807-5710**Mailing Address**
4705 OLD HWY. 37
P.O. BOX 5710
LAKELAND FL 33807-5710**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 59-0619876

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent**CHASTAIN, JAMES R JR.
1026 E. HIGHLAND DRIVE
LAKELAND FL 33813**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**

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, 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
P	CHASTIN, JAMES R JR	1026 E HIGHLAND DR	LAKELAND FL 33813	<input type="checkbox"/>
VDS	CAMPBELL, KENNETH R	P.O. BOX 2482 N/A	LAKELAND, FL 00000	<input type="checkbox"/>
V	SCHULER, ROBERT P	140 E CIRCLE ST	AVON PARK FL	<input type="checkbox"/>
I	DODDS, KEITH S	3442 E. HENDERSON CIRCLE	LAKELAND FL	<input type="checkbox"/>
V	HUNNICUTT, SUZANNE S	1825 OLEANDER DRIVE	AVON PARK FL	<input type="checkbox"/>
V3	LASSI, GREG J	2033 HIGH VISTA DR	LAKELAND FL 33813	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PDS	Chastain, James R. Jr	1026 E. Highland DR.	Lakeland, FL 33803	<input checked="" type="checkbox"/>
		601 Kerneywood St.	Lakeland, FL 33803	<input checked="" type="checkbox"/>
			33825	<input checked="" type="checkbox"/>
		3338 Songbird Lane	Lakeland, FL 33803	<input checked="" type="checkbox"/>
			33825	<input checked="" type="checkbox"/>
VS				<input checked="" type="checkbox"/>

CR2E034 (10/00)

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:** *Keith S. Dodds*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR1-3-01
Date863/646-1402
D/Time Phone #