2000 UNIFORM BUSINESS REPORT (UBR)

Mar 07, 2000 8:00 am **DOCUMENT # 355337** Secretary of State CHAUNCEY CLEARWATER TRAILER COURT, INC. 03-07-2000 90031 042 ***150.00 Mailing Address Principal Place of Business 2143 GULF-TO-BAY BLVD. 2143 GULF-TO-BAY BLVD. CLEARWATER FLA 34625 CLEARWATER FL 34625 **FAA33133** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1280188 Not Applicable Zip Country Country \$8.75 Additionāl 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARTIN, BEVERLY Street Address (P.O. Box Number is Not Acceptable) 2050 RAINBOW DR CLEARWATER FL Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE NAME MORRELL, PATRICIA NAME STREET ADDRESS 2143 GULF TO BAY BLVD STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL 00000 Change ☐ Addition TITLE TITLE Delete NAME CHAUNCEY, ED C NAME STREET ADDRESS STREET ADDRESS 2143 GULF TO BAY BLVD CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL 00000 Change ☐ Addition TITLE ☐ Delete TITLE NAME MARTIN, BEVERLY NAME STREET ADDRESS STREET ADDRESS 2050 RAINBOW DRIVE CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL 00000 ☐ Addition ☐ Change XX Delete TITLE NAMÉ CHAUNCEY, ELIZABETH NAME STREET ADDRESS STREET ADDRESS 2143 GULF TO BAY BLVD CITY-ST-ZIP-CITY-ST-ZIP CLEARWATER, FL 00000 ☐ Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ... □ Delete • NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

3. 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:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-2-2000

727-441-4300

Daytime Phone #

FILED