

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90030 018 ***150.00

DOCUMENT # 658636

1. Entity Name

JEANNIE CASNELLIE, INC.

Principal Place of Business

2706 ALTERNATE 19. NORTH
SUITE 311
PALM HARBOR FL 34683
US

Mailing Address

P.O. BOX 761
PALM HARBOR FL 34682-0761
US

2. Principal Place of Business

2706 Alternate 19 North

3. Mailing Address

P.O. Box 761

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Palm Harbor

City & State

34682-0761

Zip

Country

Zip

Country

FL

US

34683



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1991374

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CASNELLIE, JEANNIE
1435 GULF TO BAY BLVD
SUITE B
CLEARWATER FL 33515

7. Name and Address of New Registered Agent

Name **Casnellie, Jeannie**

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

2706 Alternate 19 North

City **Palm Harbor**

FL

Zip Code **34683**

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

Jeannie Casnellie, President 4-23-01

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 **PD** ☐ Delete
NAME **CASNELLIE, JEANNIE**
STREET ADDRESS **2706 ALTERNATE 19, NORTH, SUITE 311**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **CASNELLIE, JEANNIE**
STREET ADDRESS **2706 ALTERNATE 19 NORTH**
CITY-ST-ZIP **PALM HARBOR FL 34683**

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jeannie Casnellie 4-23-01

CR2E034 (10/00)

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