

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90069 019 ***150.00

DOCUMENT # 685439

1. Entity Name
CEA LEE, INC.



Principal Place of Business
**7147 E ENGLAND BLVD
INVERNESS FL 32652**

Mailing Address
**7147 E ENGLAND BLVD
INVERNESS FL 32652**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

34452

34452

4. FEI Number **59-2026038**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MECKS, CARA L
7147 E ENGLAND BLVD
INVERNESS FL 34452**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	MECKS, CARA L	
STREET ADDRESS	7147 E. ENGLAND BLVD.	
CITY-ST-ZIP	INVERNESS FL 34452	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MECKS, DAVID M	
STREET ADDRESS	7147 E. ENGLAND BLVD.	
CITY-ST-ZIP	INVERNESS FL 34452	
TITLE	S	<input type="checkbox"/> Delete
NAME	JONES, LEONARD L	
STREET ADDRESS	7147 E ENGLAND BLVD	
CITY-ST-ZIP	INVERNESS FL 34452	
TITLE	T	<input type="checkbox"/> Delete
NAME	JONES, CELINA A	
STREET ADDRESS	7147 E ENGLAND BLVD.	
CITY-ST-ZIP	INVERNESS FL 34452	
TITLE	D	<input type="checkbox"/> Delete
NAME	NELSON, RICHARD D	
STREET ADDRESS	7147 E ENGLAND BLVD	
CITY-ST-ZIP	INVERNESS FL 34452	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: [Signature] Meeks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/03 (352) 726-5859

Date Daytime Phone #

CR2E034 (10/02)