

2000 UNIFORM BUSINESS REPORT (UBR)

4.

DOCUMENT # 685501

1. Entity Name

C.C.M.J. ENTERPRISES, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

04-20-2000 90038 044 ***150.00

Principal Place of Business
3400 E. GULF TO LAKE HWY.
INVERNESS FL 34453
US

Mailing Address
3400 E. GULF TO LAKE HWY.
INVERNESS FL 34453-3209
US

2. Principal Place of Business
3466 E. GULF TO LAKE HWY.
Suite, Apt. #, etc.

3. Mailing Address
3466 E. GULF TO LAKE HWY.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
INVERNESS, FL

City & State
INVERNESS, FL

4. FEI Number 59-2198921
Applied For
Not Applicable

Zip Country
34453

Zip Country
34453

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

CLENDENNEY, CHARLES R., JR.
3400 E. GULF TO LAKE HWY.
INVERNESS FL 34453

Name
MORROW, JAMES R.
Street Address (P.O. Box Number is Not Acceptable)
3466 E. GULF TO LAKE HWY.
City
INVERNESS FL Zip Code
34453

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 *James R. Morrow* President 4-15-2000
(NOTE: Registered Agent signature required when reinstating)

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 P
NAME
STREET ADDRESS
CITY-ST-ZIP
CLENDENNEY, CHARLES R JR
3260 E. POSSUM CT.
INVERNESS FL 34452 ☒ Delete

TITLE President
NAME
STREET ADDRESS
CITY-ST-ZIP
Morrow, James R.
3466 E. Gulf to Lake Hwy.
Inverness, FL 34453 ☒ Change ☐ Addition

TITLE D
NAME
STREET ADDRESS
CITY-ST-ZIP
CLENDENNEY, CHRISTINE M.
3260 E. POSSUM CT.
INVERNESS FL 34452 ☒ Delete

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

TITLE D
NAME
STREET ADDRESS
CITY-ST-ZIP
MORROW, JAMES R.
2666 E. POSSUM CT.
INVERNESS FL 34452 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ Delete

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *James R. Morrow* James R. Morrow President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-2000 Date 352-726-3255 Daytime Phone #

CR2E034 (9/99)