

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 733916

FILED
Jan 07, 2002 8:00 AM
Secretary of State

Entity Name: CMHC PROPERTIES, INC.

Current Principal Place of Business:

1221 W LAKEVIEW
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1221 W LAKEVIEW
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 59-1747844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EADDY, MORRIS L.
1221 W. LAKEVIEW AVENUE
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VCD () Delete
Name: LANDRUM, BRTT
Address: 4050 BEVEDERE DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: CD () Delete
Name: DURHAN, MICHAEL
Address: P.O. BOX 510 N/A
City-St-Zip: PENSACOLA, FL 32593

Title: D () Delete
Name: BOND, FRED W
Address: 4305 D'EVEREAUX DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: S () Delete
Name: POWELL, MELBA K
Address: 11610 CABOT ST
City-St-Zip: PENSACOLA, FL

Title: P () Delete
Name: EADDY, MORRIS L
Address: 4030 COLLINGSWOOD RD
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: LANDRUM, BRTT
Address: 4050 BEVEDERE DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: VCD (X) Change () Addition
Name: DURHAN, MICHAEL
Address: 200 BAY BLVD
City-St-Zip: PENSACOLA, FL 32503 US

Title: D (X) Change () Addition
Name: BOND, FRED W
Address: 4305 D'EVEREAUX DRIVE
City-St-Zip: PENSACOLA, FL 32503 US

Title: S (X) Change () Addition
Name: POWELL, MELBA K
Address: 11610 CABOT ST
City-St-Zip: PENSACOLA, FL 32534

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELBA K POWELL

S

01/07/2002

Electronic Signature of Signing Officer or Director

Date