

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000005226

1. Entity Name

CAPHATS, INC.

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90117 022 ***150.00

Principal Place of Business

Mailing Address

6130 Clark Center Ave.
Suite 107
Sarasota, FL 34238

6130 Clark Center Ave.
Suite 107
Sarasota, FL 34238

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2237507

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Lester M. Johnson

CCS

6130 Clark Center Ave., Suite 107
Sarasota, FL 34238

Name

Robert H. McKnight

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

660 Beach Rd.

City

Sarasota

FL

Zip Code

34242

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

Robert H. McKnight 4/18/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME PCD
STREET ADDRESS Robert McKnight
CITY-ST-ZIP 6130 Clark Center Ave., Ste. 107
Sarasota, FL 3

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME SD
STREET ADDRESS Jeremy McKnight
CITY-ST-ZIP 6130 Clark Center Ave., Ste. 107
Sarasota, FL 3

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME VTD
STREET ADDRESS Andrea McKnight
CITY-ST-ZIP 6130 Clark Center Ave., Ste. 107
Sarasota, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME V
STREET ADDRESS Robert H. McKnight, Jr.
CITY-ST-ZIP 6130 Clark Center Ave., Ste. 107
Sarasota, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Robert H. McKnight, President 4/18/01 508-540-5051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/00)