## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## F00000005910 DOCUMENT #

1. Entity Name

CHEROKEE PARK LIMITED, INC.



Mailing Address Principal Place of Business • 000000411 1900 RINGLING BLVD 1900 RINGLING BLVD SARASOTA FL 34236 SARASOTA FL 34236 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 98-0230476 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DUMBAUGH, JOHN D Street Address (P.O. Box Number is Not Acceptable) 1900 RINGLING BLVD SARASOTA FL 34236 12 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees CR2E034 (10/02)

FILED Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90017 011 \*\*\*150.00

Make Check	Payable to Florida Department of State							
104	OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I					IN 11
NAME STREET ADDRESS	CP BELL, MIKE 1900 RINGLING BLVD SARASOTA FL 34236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
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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:**