

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000005704

1. Entity Name

CSR AMERICA, INC.

CSR

JAN 12 2000

7000

FILED  
Feb 02, 2000 8:00 am  
Secretary of State

02-02-2000 90015 004 \*\*\*150.00

Principal Place of Business

Mailing Address

1501 BELVEDERE ROAD  
WEST PALM BEACH FL 33406  
US

1501 BELVEDERE ROAD  
WEST PALM BEACH FL 33406-1501  
US

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

58-1416933

Applied For

Not Applicable

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

WOOD, SCOTT  
1501 BELVEDERE ROAD  
WEST PALM BEACH FL 33406

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.

SIGNATURE

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, 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
V	ZERN, MICHAEL R	1501 BELVEDERE ROAD	WEST PALM BEACH FL 33406	<input type="checkbox"/>
DP	CLARKE, DAVID V	1501 BELVEDERE ROAD	WEST PALM BEACH FL 33406	<input type="checkbox"/>
T	CRISER, MARSHALL	1501 BELVEDERE ROAD	WEST PALM BEACH FL 33406	<input type="checkbox"/>
V	STUMP, BLAIR E	1501 BELVEDERE ROAD	WEST PALM BEACH FL 33406	<input type="checkbox"/>
S	FOWLER, BRYAN J	1501 BELVEDERE ROAD	WEST PALM BEACH FL 33406	<input type="checkbox"/>
VT	BURMEISTER, THOMAS	1501 BELVEDERE RD	WEST PALM BEACH FL 33406	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

CSR

1-20429

7000

x1

Vendor 702254

Acct 227000

Center 700889

Approval name

or \$150.00

PO #

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:

*Michael Zern* MICHAEL ZERN 1/24/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)