## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 01, 2001 8:00 am Secretary of State **DOCUMENT # F97953** CHRISHAWN ASSOCIATES, INC. 02-01-2001 90003 005 \*\*\*150.00 Principal Place of Business Mailing Address MANASOTA INDUSTRIAL PARK MANASOTA INDUSTRIAL PARK 4693 19TH STREET COURT EAST 4693 19TH STREET COURT EAST **BRADENTON FL 34203** BRADENTON FL 34203 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 57-0694360 City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CASO, GEORGE Street Address (P.O. Box Number is Not Acceptable) 307 69TH STREET, NW **BRADENTON FL 34209** Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change Delete TITLE TITLE ANGELI, LINDA NAME NAME 5006 50TH AVE W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34210** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE ANGELI, ALEXANDER NAME NAME 5006 50TH AVE W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DS Delete TITLE ☐ Change TITLE CASO, DONNA R NAME NAME STREET ADDRESS 307 69TH ST, NW STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** CITY-ST-ZIP DC ☐ Addition ☐ Change ☐ Delete TITLE TITLE CASO, GEORGE W NAME NAME 307 69TH ST. NW STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZiP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filling 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 to an 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 tolexecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

<sup>er like empowered.</sup> Alexander Angeli

SIGNING OFFICER OR DIRECTOR

President

1/23/2001

941/745-2254

Daytime Phone #

changed, or on an attachment with an add

SIGNATURE AND T

SIGNATURE: