

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004976

1. Entity Name

CARLTON & ANJI TECHNOLOGIES, INC

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90152 028 ***150.00

Principal Place of Business

Mailing Address

7640 CREEKWOOD DR.
MOBILE AL 36695

7640 CREEKWOOD DR.
MOBILE AL 36695-4016

2. Principal Place of Business

3455 HYDE PARK WAY

Suite, Apt. #, etc.

3. Mailing Address

3455 HYDE PARK WAY

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

TALLAHASSEE, FL

City & State

TALLAHASSEE, FL

4. FEI Number

63-1197584

Applied For

Not Applicable

Zip

Country

32308

USA

Zip

Country

32308

USA

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

STABLER, LEIGH A
3455 HYDE PARK WAY
TALLAHASSEE FL 32308

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	STABLER, LEIGH A	3455 HYDE PARK WAY	TALLAHASSEE FL 32308	<input type="checkbox"/>	<input type="checkbox"/>
S	STABLER, CARLTON R	3455 HYDE PARK WAY	TALLAHASSEE FL 32308	<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"/>

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:

Leigh A. Stabler

Date

1/15/2000

Daytime Phone #

(850)906-9882