

DOCUMENT # G78069
1. Entity Name
C-MAR CONTRACTORS, INC.

Principal Place of Business
2825 PARTIN SETTLEMENT RD
KISSIMMEE FL 34744
US

Mailing Address
2825 PARTIN SETTLEMENT RD
KISSIMMEE FL 34744
US

2. Principal Place of Business
9130 NIAGARA RD.
Suite, Apt. #, etc.

3. Mailing Address
9130 NIAGARA RD.
Suite, Apt. #, etc.

City & State
Weeki Wachee, Florida
Zip
34613
Country
USA

City & State
Weeki Wachee, Florida
Zip
34613
Country
USA

6. Name and Address of Current Registered Agent
DANLEY, RICHARD D
3501 13TH ST.
ST. CLOUD FL 34769

FILED
Jan 08, 2001 8:00 am
Secretary of State

01-08-2001 90015 009 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2388116
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	P MARTINO, RONALD 2825 PARTIN SETTLEMENT RD KISSIMMEE FL 34744 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTINO, RONALD 9130 NIAGARA RD. Weeki Wachee, FL. 34613 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARTINO, CHESTER P 2825 PARTIN SETTLEMENT RD KISSIMMEE FL 34744 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARTINO, CHESTER P. 9130 NIAGARA RD. Weeki Wachee, FL. 34613 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Ronald Martino 1-4-2001 (407) 932-4040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)