

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90144 036 ***150.00

DOCUMENT # J47901

1. Entity Name

CSC HOLDING, CORP.

Principal Place of Business

C/O ROY A KERSHAW
605 TOWNSEND ROAD
COCOA FL 32926
US

Mailing Address

C/O ROY A KERSHAW
605 TOWNSEND ROAD
COCOA FL 32926
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

4050 W. King Street

Suite, Apt. #, etc.

P.O. Box 1390

City & State
Cocoa, Florida

City & State

Cocoa, Florida

Zip
32926

Country
Brevard

Zip
32923-1390

Country
Brevard

4. FEI Number **59-2744557**

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

KOIVU, MARTIN S.
5100 DALEHURST DRIVE
COCOA FL 32926

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, 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
DVT
KOIVU, MARTIN S.
5100 DALEHURST DR.
COCOA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
KERSHAW, ROY A
1415 CAPHEUS COURT
MERRITT ISLAND FL 32953

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROY A KERSHAW 4/27/01 321-632-5640
Date Daytime Phone #

CR2E034 (10/00)