

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State
 04-18-2002 90452 031 ***150.00

OFFICIAL
 AV

DOCUMENT # J58537

1. Entity Name
C. J. PROPERTIES, INC.

Principal Place of Business

% JOHN R. SHIPE
401 W. DONEGAN AVE., STE. A
KISSIMMEE FL 34741
US

Mailing Address

1000 SHORE DR.
KISSIMMEE FL 34744
US



2. Principal Place of Business

1000 SHORE DR.
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

KISSIMMEE, FL

City & State

4. FEI Number

59-2773646

Applied For

Not Applicable

Zip

34744

Country

US

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHIPE, JOHN R.
401 W DONEGAN AVE. SUITE A
KISSIMMEE FL 34741

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1000 SHORE DR.

City

KISSIMMEE

FL

Zip Code

34744

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, 2002 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 **PD** ☐ Delete
 NAME **SHIPE, JOHN R.**
 STREET ADDRESS **1000 SHORE DR.**
 CITY-ST-ZIP **KISSIMMEE FL 34744**

TITLE **VTD** ☐ Delete
 NAME **SHIPE, CECILIA**
 STREET ADDRESS **1000 SHORE DR.**
 CITY-ST-ZIP **KISSIMMEE FL 34744**

TITLE **SD** ☐ Delete
 NAME **ROGALSKI, SUZAN C S**
 STREET ADDRESS **4671 BRANDY OAK COURT**
 CITY-ST-ZIP **JACKSONVILLE FL 32257**

TITLE **D** ☐ Delete
 NAME **SHIPE, PAUL E**
 STREET ADDRESS **1000 SHORE DR**
 CITY-ST-ZIP **KISSIMMEE FL 34744**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **14386 NOTTINGHAM WAY CIR**
 CITY-ST-ZIP **ORLANDO, FL 32828**

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

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

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

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:

John R. Shipe
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHIPE, PRES.

4/4/02

407-846-3676

Date

Daytime Phone #

CR2E034 (9/01)