

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K19825

1. Entity Name  
C.A. STEELMAN, INC.

Principal Place of Business  
4799 ORANGE RIVER LOOP RD  
FT. MYERS FL 33905  
US

Mailing Address  
P.O. BOX 51242  
FT. MYERS FL 33944-1242  
US

2. Principal Place of Business 2275 BRUNER LANE Suite, Apt. #, etc. SUITE #1	3. Mailing Address 2275 BRUNER LANE Suite, Apt. #, etc. SUITE #1
City & State FORT MYERS, FL.	
Zip 33912	Country USA
Zip 33912	Country USA

4. FEI Number **65-0043542**  Applied For  
 Not Applicable

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

## 6. Name and Address of Current Registered Agent

STEELEMAN, CHRISTOPHER ADAM  
4799 ORANGE RIVER LOOP RD.  
FT. MYERS FL 33905

Name	
Street Address (P.O. Box Number is Not Acceptable) 2275 BRUNER LN. SUITE #1	
City FORT MYERS,	Zip Code FL 33912

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEELEMAN, CHRISTOPHER A. 4799 ORANGE RIVER LOOP RD. FT. MYERS FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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:

Chris A. Steelman 01/18/01 (941) 489-2296

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Jan 29, 2001 8:00 am  
Secretary of State

01-29-2001 90114 040 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)