

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K69960

i. Entity Name

CRADDOCK AND PALMERI INC.

FILED

Feb 04, 2000 8:00 am  
Secretary of State

02-04-2000 90049 017 \*\*\*150.00

Principal Place of Business

Mailing Address

~~500 NE SPANISH RIVER BLVD~~  
~~SUITE 30~~  
BOCA RATON FL 33431  
US

~~500 NE SPANISH RIVER BLVD~~  
~~SUITE 30~~  
BOCA RATON FL 33431-4516  
US

00016934



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

518 Gardenia Terrace  
Suite, Apt. #, etc.

3. Mailing Address

518 Gardenia Terrace  
Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

City & State

DELRAY BEACH, FL

4. FEI Number

65-0106131

Applied For

Not Applicable

Zip

33444

Country

USA

Zip

33444

Country

USA

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

6. Name and Address of Current Registered Agent

SUSAN R. CRADDOCK

~~500 NE SPANISH RIVER BLVD~~  
~~SUITE 30~~  
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

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

518 Gardenia Terrace

City

DELRAY BEACH

FL

Zip Code

33444

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS CRADDOCK, SUSAN R.  
CITY-ST-ZIP ~~500 NE SPANISH RIVER BLVD., STE. 30~~  
~~BOCA RATON FL~~

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS PALMERI, LOUIS J  
CITY-ST-ZIP ~~500 NE SPANISH RIVER BLVD., STE. 30~~  
~~BOCA RATON FL~~

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 D  
STREET ADDRESS CRADDOCK, SUSAN R.  
CITY-ST-ZIP 518 Gardenia Terrace  
DELRAY BEACH, FL 33444

TITLE ☒ Change ☐ Addition  
NAME VP  
STREET ADDRESS PALMERI, LOUIS J.  
CITY-ST-ZIP 518 Gardenia Terrace  
DELRAY BEACH, FL 33444

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

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, 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

Date

Daytime Phone #

SUSAN CRADDOCK  
PRES

1/3/00