

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90148 027 ***150.00

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AV

DOCUMENT # L41633

1. Entity Name
CIVIL INVESTIGATION AGENCY, INC.



Principal Place of Business
5010 80TH AVE CIR E
SARASOTA FL 34243

Mailing Address
5010 80TH AVE CIR E
SARASOTA FL 34243



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0163017**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUNDERMAN, JR. C J.
5010 80TH AVE CIR E
SARASOTA FL 34243

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **SUNDERMAN, C. J. JR.**
STREET ADDRESS **5010 80TH AVE CIR E**
CITY-ST-ZIP **SARASOTA FL 34243**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: _____ **SIGNATURE REQUIRED PRESIDENT**

4/28/03 741-359-3707

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment

MEMO

86115573
L41633



Civil Investigation Agency, Inc.
Post Office Box 458
Talleavast, FL 34270-0458
State Lic. # A-9100200
Tel: (941) 359-3707 Fax: (941) 359-1296
Website: ciainvestigations.info

Date: 05/05/03
To: Florida Department of Corporations
From: C.J. Sunderman, Jr.
Subject: Returned Report

As per a telephone conversation this date with a gentleman by the name of Lee in your office, please find enclosed the U. B. R. report along with a check for the filing fee. This report was returned to my office due to a wrong address on the check.

My secretary enclosed the form and the check in a windowed envelope. It was found the check had the address for the Florida Department of Revenue instead of the Florida Department of Corporations.

In our conversation Lee stated I should enclose a memo explaining the situation.

If there are any questions or problems please contact me at my office any time.

Sincerely,


C.J. Sunderman, Jr.

President