

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N08157

1. Entity Name

CHERRY LAKE UTILITIES CORPORATION

Principal Place of Business

Mailing Address

RT 3, BOX 360
MADISON FL 32340

RT 3, BOX 360
MADISON FL 32340-9509

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

59-0563580

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

HARDEE, CARY A.
901 WEST BASE STREET
MADISON FL

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]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME PRIMM, GAYLE
STREET ADDRESS RT 3, BOX 850
CITY-ST-ZIP MADISON FL 32340

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

TITLE VD ☐ Delete
NAME CARROLL, MIKE
STREET ADDRESS RT. 3, BOX 815
CITY-ST-ZIP MADISON FL

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

TITLE ST ☐ Delete
NAME FINE, VERONICA L
STREET ADDRESS RT. 1, BOX 292-A
CITY-ST-ZIP PINETTA FL 32350

TITLE ☒ Change ☐ Addition
NAME 3467 NE CHERRY LAKE CIRCLE
STREET ADDRESS
CITY-ST-ZIP

TITLE CDP ☒ Delete
NAME FLETCHER, JEFF
STREET ADDRESS RT. 3 BOX 498
CITY-ST-ZIP MADISON FL 32340

TITLE VC ☐ Change ☒ Addition
NAME BARRS, MELBA
STREET ADDRESS Route 3, Box 945
CITY-ST-ZIP Madison, FL 32340

TITLE VPD ☒ Delete
NAME ADAMS, JAMES
STREET ADDRESS ROUTE 3, BOX 718
CITY-ST-ZIP MADISON FL 32340

TITLE ☐ Change ☒ Addition
NAME RAY, CAROLYNE
STREET ADDRESS Route 3, Box 960
CITY-ST-ZIP Madison, FL 32340

TITLE D ☐ Delete
NAME MATHIS, BRUCE
STREET ADDRESS RT. 1 BOX 272
CITY-ST-ZIP PINETTA FL 32350

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS 2361 NE CHERRY LAKE CIRCLE
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Veronica L. Fine 4/11/2000 850-929-4620

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE