

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90116 001 ****61.25

DOCUMENT # N97000005590

1. Entity Name

CRUISIN KNIGHTS OF BONITA SPRINGS, INC.

Principal Place of Business

Mailing Address

**26843 OUR COURT
 BONITA SPRINGS FL 34135**

**26843 OUR COURT
 BONITA SPRINGS FL 34135-5202**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CONNOLLY, ROBERT MR
 26843 OUR COURT
 BONITA SPRINGS FL 34135**

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, 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	<input type="checkbox"/> Delete
NAME	NOYA, ROY	
STREET ADDRESS	5242 28TH PLACE SOUTHWEST	
CITY-ST-ZIP	GOLDEN GATE FL 34116	
TITLE	D	<input type="checkbox"/> Delete
NAME	NOYA, JOYCE	
STREET ADDRESS	5242 28TH PLACE SOUTHWEST	
CITY-ST-ZIP	GOLDEN GATE FL 34116	
TITLE	D	<input type="checkbox"/> Delete
NAME	EWELL, BONNIE	
STREET ADDRESS	2370 31ST AVENUE NORTHEAST	
CITY-ST-ZIP	NAPLES FL 34120	
TITLE	P	<input type="checkbox"/> Delete
NAME	CONNOLLY, ROBERT V	
STREET ADDRESS	26843 OUR COURT	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	S	<input type="checkbox"/> Delete
NAME	CONNOLLY, RUBY K	
STREET ADDRESS	26843 OUR COURT	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	T	<input type="checkbox"/> Delete
NAME	CARBON, CHRISTINE	
STREET ADDRESS	27931 WASHINGTON ST SE	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: *Christine Carbon* **CHRISTINE CARBON** ^{1/18/2000}
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **941-995-3646**

CR2E037 (9/99)