

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005769

1. Entity Name

CHARLOTTE SKATEPARK, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90154 025 ****61.25

Principal Place of Business

Mailing Address

2315 AARON ST.
PT. CHARLOTTE FL 33952

2315 AARON ST.
PT. CHARLOTTE FL 33952-5305

2. Principal Place of Business

3. Mailing Address

P.O. Box 512551

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Punta Gorda, FL

Zip

Country

Zip

Country

33951

4. FEI Number

65-0789593

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

CARR, DAROL H
2315 AARON ST.
PT. CHARLOTTE FL 33952

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CARR, DAROL H
2315 AARON ST.
PT. CHARLOTTE FL 33952 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GREGOIRE, KENYON
3284 TRIPOLI BLVD.
PUNTA GORDA FL 33950 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Smith, Marilyn
654 Andros Ct.
Punta Gorda, FL 33980 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
INMAN, CHERYL
21272 BERKSHIRE
PT. CHARLOTTE FL 33984 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Koch, Rex
252 West Olympia Ave
Punta Gorda, FL 33950 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DUNN, RANDALL F
2211 BERMUDA ST.
PT. CHARLOTTE FL 33980 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SNYDER, DEBORAH L
P.O. BOX 380845
MURDOCK FL 33982 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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

Date

Daytime Phone #

4-26-00 941 637 0542

CR2E037 (9/99)