

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90006 012 ***158.75

DOCUMENT # CORPORATE BUILDING MANAGEMENT
 1. Entity Name INC.
P000000057289 (U)

Principal Place of Business Mailing Address
201 HUNT ST. 201 HUNT ST.
SUITE 213 SUITE 213
CLEMMONT FL. 34711 CLEMMONT FL. 34711

978439

2. Principal Place of Business 3. Mailing Address
201 HUNT ST. 201 HUNT ST.
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 213 SUITE 213
 City & State City & State
CLEMMONT FLORIDA CLEMMONT FLORIDA
 Zip Country Zip Country
34711 USA 34711 USA

DO NOT WRITE IN THIS SPACE.

4. FEI Number 59-3670259 Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent
LAUGDEN OLA
20500 N.W. 36 AVE
CAROL CITY, FL. 33055

7. Name and Address of New Registered Agent
 Name OLA LAUGDEN
 Street Address (P.O. Box Number is Not Acceptable)
20500 N.W. 36 AVE
 City CAROL CITY FL Zip Code 33055

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 N/A (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, 2001, 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
☐ Delete
 TITLE P
 NAME LAUGDEN ANTHONY
 STREET ADDRESS 201 HUNT ST. APT 213
 CITY-ST-ZIP CLEMMONT, FL. 34711
☐ Delete
 TITLE LAUGDEN JOAN
 NAME 201 HUNT ST. APT 213
 STREET ADDRESS CLEMMONT, FL. 34711
 CITY-ST-ZIP
☐ Delete
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
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 CITY-ST-ZIP
☐ Delete
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition
 TITLE
 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bill Carter, Lake Park 8-13-01

CR2E034 (11/00)

CBM

Corporate Funding Management

Attachment

Doc#

978439

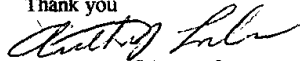
202

20000051289

Anthony Lavender
201 Hunt St.
Suite 213
Clermont, FL. 34711

To whom it may concern the uniform business report was lost in the mail do to a change in address.
I'm asking you to please wave the late fee. Do to postal area.

Thank you



Anthony Lavender