

2002 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **P00000054084**

1. Entity Name

CHRISTINE'S TREASURE HOUSE, INC.**FILED**
Aug 25, 2002 8:00 am
Secretary of State

08-25-2002 90215 005 ***150.00

0128663 AT

Principal Place of Business

**7066 STATE RD. 37 NORTH
MULBERRY FL 33860**

Mailing Address

**7066 STATE RD. 37 NORTH
MULBERRY FL 33860**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3646323**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**BALL, CHRISTINE M
7066 STATE RD. 37 NORTH
MULBERRY FL 33860**

7. Name and Address of New Registered Agent

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

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

(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 \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	BALL, LARRY L	
STREET ADDRESS	5811 HOLLYHOCK DR.	
CITY-ST-ZIP	LAKELAND FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	BALL, CHRISTINE M	
STREET ADDRESS	5811 HOLLYHOCK DR.	
CITY-ST-ZIP	LAKELAND FL 33813	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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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		

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:

CHRISTINE M. BALL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8/21/02

Daytime Phone #

863-644-7662

CR2E034 (4/02)

Attachment
677146
PO0000054084

August 21, 2002

Florida Department of State
Katherine Harris
Secretary of State

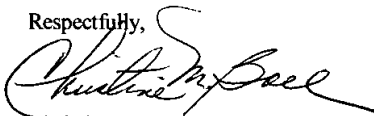
To Whom It May Concern: - - - - -

Please be advised that our Corporation did not receive prior notice of 2002 Uniform Business Report.

Therefore, we have enclosed a check in the amount of \$150.00, the original amount due.

If you have any questions, please advise.

Respectfully,



Christine M. Ball
President
Christine's Treasure House, Inc.
7066 S.R. 37 North
Mulberry, FL 33860
(863) 644-7662

cc: file