

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90450 044 ***150.00

DOCUMENT # P00000069498

1. Entity Name
 TRAVELING CFO.com

Principal Place of Business
 4301 32ND STREET WEST SUITE D-5
 BRADENTON FL 34207

Mailing Address
 4301 32ND STREET WEST SUITE D-5
 BRADENTON FL 34207

2. Principal Place of Business
 4855 27th St W
 Suite, Apt. #, etc.

3. Mailing Address
 4855 27th St W
 Suite, Apt. #, etc.

City & State
 BRADENTON FL

City & State
 BRADENTON, FL

Zip
 34207

Zip
 34207

4. FEI Number
 65-1038007

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
 GAY, JIM
 4301 32ND STREET WEST SUITE D-5
 BRADENTON FL 34207

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
 4855 27th St W

City BRADENTON **FL** **Zip Code** 34207

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. (If OLE Registered Agent signature required when reappointing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
 After May 1, 2002 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**

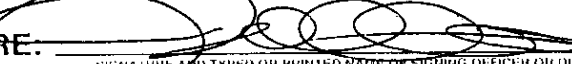
11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	D CABLISH, HOMER G III	4301 32ND STREET WEST SUITE D-5	BRADENTON FL 34207	☐
				☐
				☐
				☐
				☐
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change ☐ Addition
		4855 27th St W	BRADENTON, FL 34207	☐
				☐
				☐
				☐
				☐
				☐

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:  **4-24-02** **941-7589507**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)