

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000079580

1. Entity Name

CANNON & FRENCH ASSOCIATES, INC.

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90007 004 ***150.00

Principal Place of Business

1422 SW 2 AVE
CAPE CORAL FL 33991

Mailing Address

1422 SW 2 AVE
CAPE CORAL FL 33991

2. Principal Place of Business

16520 So. Tamiami TR.
Suite, Apt. #, etc.

Suite 11

City & State

FT. Myers FL

Zip

33908

Country

nee

3. Mailing Address

16520 So. Tamiami TR.
Suite, Apt. #, etc.

Suite 11

City & State

FT. Myers FL

Zip

33908

Country

nee



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1034546

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATLAND, RUDOLPH K
12995 S CLEVELAND AVE STE 107
FT MYERS FL 33907

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.

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 \$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

TITLE PT ☐ Delete
NAME Jammie French
STREET ADDRESS 1209 SW 48TH Terr. #B
CITY-ST-ZIP Cape Coral, FL 33914

TITLE VP/S ☐ Delete
NAME Donna A. Cannon
STREET ADDRESS 1422 SW 2ND Ave.
CITY-ST-ZIP Cape Coral, FL 33991

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

Jammie French

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jammie French

Date 5/24/01 Daytime Phone #

0540013

CR2E034 (10/00)