

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90019 013 ***150.00

DOCUMENT # P00000093641

1. Entity Name
CIMARRON ENTERPRISES, INC.

Principal Place of Business

2029 SR 60 R
LAKE WALES FL 33853

Mailing Address

2410 WINTERSET RD
WINTER HAVEN FL 33884

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3675800**
59-3675800

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FITZWATER, STEPHEN C
2410 WINTERSET RD
WINTER HAVEN FL 33884

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 State

10. 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** ☐ Delete
NAME **FITZWATER, STEPHEN C**
STREET ADDRESS **2410 WINTERSET RD**
CITY-ST-ZIP **WINTER HAVEN FL 33884**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Stephen C. Fitzwater **STEPHEN C. FITZWATER** **7/3/02** **863 679 7753**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment

CIMARRON ENTERPRISES, INC.
2410 WINTERSET RD.
WINTER HAVEN, FL 33884

JULY 3, 2002

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. Box 1500
TALLAHASSEE, FL 32302-1500

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GENTLEMEN:

I RECEIVED THE DUPLICATE 2002 UNIFORM BUSINESS REPORT ON JULY 2, 2002, AND CALLED YOUR OFFICE THIS MORNING, AND PURSUANT TO THE RECOMMENDATION OF THE PERSON I TALKED TO, I OFFER THE FOLLOWING: I UNEQUIVOCALLY STATE THAT I NEVER RECEIVED THE ORIGINAL FORM.

IN THE PAST YEAR SEVERAL ITEMS OF MAIL THAT I WAS SUPPOSED TO HAVE RECEIVED HAS BEEN EITHER LOST BY THE POST OFFICE, DELIVERED TO THE WRONG ADDRESS MANY TIMES, OR STOLEN. ONE ITEM WAS MY COUNTY OCCUPATIONAL LICENSE. MOST RECENTLY A PARCEL THAT EVEN HAD A DELIVERY CONFIRMATION TAG WAS DELIVERED TO THE WRONG ADDRESS. I HAVE REPORTED THIS TO THE LOCAL POSTMASTER, BUT IT PERSISTS, AND I HAVE RECEIVED NO ADEQUATE EXPLANATION OR RESOLUTION. I THEREFORE REQUEST THAT YOU ACCEPT THE \$150 FEE WITHOUT PENALTY.

THANK YOU FOR YOUR CONSIDERATION IN THIS MATTER.

SINCERELY,


STEPHEN C. FITZWATER