

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000067222

1. Entity Name

CHRISTO POINT, INC.

Principal Place of Business

2236 SOUTHWEST SECOND TERRACE  
CAPE CORAL FL 33991

Mailing Address

2236 SOUTHWEST SECOND TERRACE  
CAPE CORAL FL 33991

2. Principal Place of Business

202 3rd St

3. Mailing Address

202 3rd St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft. Myers, Florida

City & State

Ft. Myers, Florida

4. FEI Number

65-1123906

Applied For

Not Applicable

Zip

33907

Country

Lee

Zip

33907

Country

Lee

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WRIGHT, MARJORIE

2236 SOUTHWEST SECOND TERRACE  
CAPE CORAL FL 33991

7. Name and Address of New Registered Agent

Name

KIA

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, 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

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPT  
WRIGHT, MARJORIE  
2236 SOUTHWEST SECOND TERRACE  
CAPE CORAL FL 33991

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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WRIGHT, PAMELA SUE  
2236 SOUTHWEST SECOND TERRACE  
CAPE CORAL FL 33991

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**Jun 20, 2002 8:00 am**  
**Secretary of State**

06-20-2002 90058 030 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 3, 2002

CHRISTO POINT, INC.  
202 3RD ST  
FORT MYERS, FL 33907

Subject: **CHRISTO POINT, INC.**

Reference Number: **P01000067222**

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/CM  
ANNUAL REPORTS SECTION

Attachment  
Document #  
P01000067222

870220

Check

Sign

Sorry