

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000110995

1. Entity Name

CHOICE EQUIPMENT INTERNATIONAL, INC.

Principal Place of Business

260 SILK BAY PLACE
LONGWOOD FL 32750

Mailing Address

260 SILK BAY PLACE
LONGWOOD FL 32750

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

KELLEY, JILL

260 SILK BAY PLACE
LONGWOOD FL 32750

4. FEI Number

59-3659671

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

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 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

D
KELLEY, JILL
260 SILK BAY PLACE
LONGWOOD FL 32750

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

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☐ Change ☐ Addition

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:

Jill Kelley
JILL KELLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/02
Date

Daytime Phone #

FILED
Aug 01, 2002 8:00 am
Secretary of State

07-17-2002 90130 027 ***150.00



DO NOT WRITE IN THIS SPACE

I have had this no. for awhile

CR2E034 (4/02)

Attachment 40332
#P01000110995 7/10/02

I did not receive my notice
prior to this one being sent.

I called and was told to send
a letter ^{explaining this} and check for \$150.00
and to watch for future notices
by Feb.

Thanks-

Joe Kelley
Choice Equipment