

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90261 047 ***150.00

DOCUMENT # P01000112496

1. Entity Name
CHRIS WOMERSLEY ENTERPRISES, INC.

Principal Place of Business

**11212 VERANDA COURT
BRADENTON FL 34209**

Mailing Address

**11212 VERANDA COURT
BRADENTON FL 34209**

2. Principal Place of Business

BRADENTON FL.

3. Mailing Address

11212 VERANDA CT

Suite, Apt. #, etc.

11212 VERANDA CT

Suite, Apt. #, etc.

City & State

BRADENTON FL

City & State

BRADENTON FL.

4. FEI Number

266-35-6919

☒ Applied For
☐ Not Applicable

Zip

34209

Country

USA

Zip

34209

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOMERSLEY, CHRISTOPHER J

**11212 VERANDA COURT
BRADENTON FL 34209**

7. Name and Address of New Registered Agent

Name

CHRISTOPHER J. WOMERSLEY

Street Address (P.O. Box Number is Not Acceptable)

11212 VERANDA CT.

City

BRADENTON

FL

Zip Code

34209

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 **CHRIS WOMERSLEY**
Signature, typed or printed name of registered agent and title if applicable.

Chris Womersley
(NOTE: Registered Agent signature required when reinstating)

4/24/02
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

TITLE **D.** ☐ Delete
NAME **WOMERSLEY, CHRISTOPHER J**
STREET ADDRESS **11212 VERANDA COURT**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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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

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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: **Chris Womersley**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02
Date

404-432-8059
Daytime Phone #

CR2E034 (9/01)