

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 18, 2003 8:00 am
Secretary of State

08-18-2003 90163 015 ***150.00

DOCUMENT # P02000026506

1. Entity Name
LINDAU CHEVRON, INC.



Principal Place of Business
**6402 US HWY 30 N
ELLENTON FL 34222**

Mailing Address
**6402 US HWY 30 N
ELLENTON FL 34222**

2. Principal Place of Business

6402 U.S. Hwy 301 N

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ELLENTON

City & State

4. FEI Number

010624378

Applied For

Not Applicable

Zip
FL

Country

MANTLE

Zip

34222

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**LINDAU, DAVID K
6402 US HWY 30 N
ELLENTON FL 34222**

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 *David K Lindau*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/24/03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **LINDAU, BARRY T**
STREET ADDRESS **6402 US HWY 30 N**
CITY-ST-ZIP **ELLENTON FL 34222**

TITLE **D** ☐ Delete
NAME **LINDAU, CANDICE A**
STREET ADDRESS **6402 US HWY 30 N**
CITY-ST-ZIP **ELLENTON FL 34222**

TITLE **V** ☐ Delete
NAME **LINDAU, DAVID K**
STREET ADDRESS **6402 US HWY 30 N**
CITY-ST-ZIP **ELLENTON FL 34222**

TITLE **PRESIDENT** ☐ Delete
NAME **LINDAU, ETOLA V.**
STREET ADDRESS **1637 COUNTRY WALK DR**
CITY-ST-ZIP **JACKSONVILLE, FL 32003**

TITLE **SEC. TREAS.** ☐ Delete
NAME **LINDAU, DEBORAH G.**
STREET ADDRESS **1295 D CARLTON ARMS CIR**
CITY-ST-ZIP **BRADENTON, FL 34228**

TITLE **D.** ☐ Delete
NAME **LINDAU, JEFFERY H.**
STREET ADDRESS **442 RIVERMOOR DR**
CITY-ST-ZIP **WATERFORD, WI 53185**

11. 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
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David K Lindau*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/03

Date

941-812-3140

Daytime Phone #

CR2E034 (4/03)

July 22, 2003

Attachment

to whom it My Concern,

90150886
PO2000024506

We never received any prior notices of
this report - Could be because the address
was wrong -

Don P. Linder, V. President