

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000119066

1. Entity Name

2 Chefs Will Travel / Catering Co.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY 12 AM 11:36

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6518 US Hwy 98

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Port St Joe FL

City & State

4. FEI Number

04-3719739

Applied For

Not Applicable

Zip

32456

Country

Gulf

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Thel Morgan

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

6518 US Hwy 98

City Port St. Joe

FL

Zip Code

32456

**DO NOT WRITE
IN THIS SPACE**

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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 1 Director
NAME Forrest N. Morgan
STREET ADDRESS 6518 US Hwy 98
CITY-ST-ZIP Port St. Joe FL 32456

TITLE 1 Director
NAME James T. Small
STREET ADDRESS 115 Coronado Street
CITY-ST-ZIP Port St. Joe FL 32456

TITLE
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CITY-ST-ZIP

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100018806151
05/12/03--01065 -001 **150.00

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-12-03

Date

850-647-2777

Daytime Phone #

CR2E034B (12/01)

5-12-03

To Whom it may concern,
I request that you wave the year 2003
UBR late fee. I never recieved the UBR
Report in the mail.

Neal Morgan

Ref # 2 Chefs Will Travel/Catering Co..

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