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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000002816

1. Corporation Name
C&B HOLUB, INC.



Principal Place of Business
**1150 COUNTRYCLUB BLVD.
SUNNY HILLS FL 32428**

Mailing Address
**1150 COUNTRYCLUB BLVD.
SUNNY HILLS FL 32428**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/03/1992

4. FEI Number

59-3152654

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

3634 Country Club Blvd

2a. Mailing Address

3634 Country Club Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sunny Hills, FL

City & State

Sunny Hills, FL

Zip

32428

Country

U.S.A.

Zip

32428

Country

U.S.A.

9. Name and Address of Current Registered Agent

**HOLUB, CHARLES F
1150 COUNTRYCLUB BLVD.
SUNNY HILLS FL 32428**

10. Name and Address of New Registered Agent

81 Name **Holub, Charels F.**

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

3634 Country Club Blvd.

83

84 City

Sunny Hills

FL

85 Zip Code

32428

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **HOLUB, CHARLES F**
STREET ADDRESS **34169 N. SINGLE OAK CT.**
CITY-ST-ZIP **INGLESIDE IL**

TITLE **VPT** ☐ DELETE

NAME **HOLUB, BETTY A**
STREET ADDRESS **34169 N. SINGLE OAK CT.**
CITY-ST-ZIP **INGLESIDE IL**

TITLE **S** ☐ DELETE

NAME **HOLUB, JENNIFER M**
STREET ADDRESS **2906A N. HARRISON AVE**
CITY-ST-ZIP **PANAMA CITY FL 32405**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition

1.2 NAME **Holub, Charles F**
1.3 STREET ADDRESS **3634 Country Club Blvd.**
1.4 CITY-ST-ZIP **Sunny Hills, FL 32428**

2.1 TITLE **VPT** ☒ Change ☐ Addition

2.2 NAME **Holub, Betty A.**
2.3 STREET ADDRESS **3634 Country Club Blvd.**
2.4 CITY-ST-ZIP **Sunny Hills, FL 32428**

3.1 TITLE **S** ☒ Change ☐ Addition

3.2 NAME **Holub, Jennifer M.**
3.3 STREET ADDRESS **1774 Salem Drive**
3.4 CITY-ST-ZIP **Sunny Hills, FL 32428**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

PLEASE SIGN
& DATE

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Jennifer M. Holub** REQUIRED

1/31/99

850-773-3619

CR2E034 (11/98)