

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000007246

1. Entity Name

CHRIS-TEL COMPANY OF SOUTHWEST FLORIDA, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90027 031 \*\*\*150.00

Principal Place of Business

1850 BOY SCOUT DR  
 STE 205  
 FORT MYERS FL 33907  
 US

Mailing Address

1850 BOY SCOUT DR  
 STE 205  
 FORT MYERS FL 33907-2127  
 US

2. Principal Place of Business

2546 EDISON AVE.

3. Mailing Address

2546 EDISON AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. MYERS, FL

City & State

FT MYERS, FL

Zip

33901

Country

USA

Zip

33901

Country

USA

4. FEI Number

65-0384539

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

WHEELER, HOWARD L JR.  
 1850 BOY SCOUT DR  
 STE 205  
 FORT MYERS FL 33901

7. Name and Address of New Registered Agent

Name  
 HOWARD L. WHEELER SR.

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

2546 EDISON AVE

City

FT MYERS

FL

Zip Code

33901

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)

4/21/00

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, 2000 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 ☐ Delete  
 NAME D  
 STREET ADDRESS WHEELER, HOWARD L  
 CITY-ST-ZIP 1850 BOYSCOUT DR, #205  
 FT MYERS FL

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME D  
 STREET ADDRESS HOWARD L. WHEELER SR  
 CITY-ST-ZIP 2546 EDISON AVE.  
 FT. MYERS, FL. 33901

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

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

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

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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 empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/00 (941) 226-0500

Date

Daytime Phone #

CR2E034 (9/99)