

AMENDED AND RESTATED
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000055855

1. Entity Name

CAPE CORAL BINGO, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

03 DEC -4 PM 3:58

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4721 SE 10th Place

3. Mailing Address
4721 SE 10th Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Cape Coral, FL

City & State
Cape Coral, FL

4. FEI Number
65-0422979

Applied For
Not Applicable

Zip
33904

Country
USA

Zip
33904

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Pam Roach

Street Address (P.O. Box Number is Not Acceptable)
12011 Cleveland Avenue, Unit #6

City
Ft. Myers, FL Zip Code
33907

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

(NOTE: Registered Agent signature required when reinstating)

12/2/03
DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Lloyd L. Lathrop, Jr.
3 Ole Musket Road
Cumberland, Foreside ME 04110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200025234292

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DO NOT WRITE IN THIS SPACE

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

SIGNATURE: L. L. Lathrop
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/2/03
Date

Daytime Phone #

CR2E034B (12/02)



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 346018 4311473

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 61.25

ORDER DATE : December 4, 2003

ORDER TIME : 11:04 AM

ORDER NO. : 346018-020

CUSTOMER NO: 4311473

CUSTOMER: Ms. Jackie Gerstenfeld
Stearns Weaver Miller
Suite 2200, Museum Tower
150 West Flagler Street
Miami, FL 33130

ANNUAL REPORT FILING

NAME: CAPE CORAL BINGO, INC.

RECEIVED
03 DEC -4 PM 12:43
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan-EXT#1155

EXAMINER'S INITIALS: _____