

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90644 049 ***150.00

0051321 AV

DOCUMENT # P93000080874

1. Entity Name
THE CAYMAN CARAVAN, INC.



Principal Place of Business
**500 PARKWOOD DR.
PANAMA CITY FL 32405
US**

Mailing Address
**500 PARKWOOD DR.
PANAMA CITY FL 32405
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1550182**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUSSO, JAMES FRANCIS
500 PARKWOOD DR.
PANAMA CITY FL 32405**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|-----------------------------|---------------------------------|
| TITLE | PD | <input type="checkbox"/> Delete |
| NAME | RUSSO, JAMES FRANCIS | |
| STREET ADDRESS | 500 PARKWOOD DR. | |
| CITY-ST-ZIP | PANAMA CITY FL | |
| TITLE | V | <input type="checkbox"/> Delete |
| NAME | RUSSO, JAMES FRANK | |
| STREET ADDRESS | 500 PARKWOOD DRIVE | |
| CITY-ST-ZIP | PANAMA CITY FL 32405 | |
| TITLE | S | <input type="checkbox"/> Delete |
| NAME | RUSSO, JAMES FRANCIS | |
| STREET ADDRESS | 500 PARKWOOD DR. | |
| CITY-ST-ZIP | PANAMA CITY FL | |
| TITLE | T | <input type="checkbox"/> Delete |
| NAME | RUSSO, JAMES FRANK | |
| STREET ADDRESS | 500 PARKWOOD DR. | |
| CITY-ST-ZIP | PANAMA CITY FL 32405 | |
| TITLE | | <input type="checkbox"/> Delete |
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| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
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| 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: *James Frank Russo*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 Apr 2003 **850-872-2495**
Date Daytime Phone #

CR2E034 (10/02)