2000 UNIFORM BUSINESS REPORT (UBR)

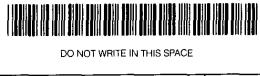
DOCUMENT # P9400063026

1. Entity Name

C.C. ENTERPRISES OF PASCO COUNTY, INC.

Principal Place of Business Mailing Address 9050 LAKEVIEW DRIVE 9050 LAKEVIEW DRIVE NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL 34654-3414

FILED May 01, 2000 8:00 am Secretary of State 05-01-2000 90442 024 ***150.00



Principal Place of Business 3. Mailing Address						_						
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc.					DO NOT \	WRITE IN	THIS SF	PACE	
			City & State			<u> </u>					1 100	plind For
						4. +	4. FEI Number 59-3260126				<u> </u>	oplied For ot Applicable
Zip	C	ountry .	Zip	p Country							8.75 Additional ee Required	
	6. Name and	Address of Current R	egistered Agent			7. N	lame and Ad	dress of Ne	w Regist	ered Ag	gent	
		_			Name							
CLARK, CAROL 9050 LAKEVIEW DRIVE NEW PORT RICHEY FL 34654					Street Address (P.O. Box Number is Not Acceptable)							
				1	City					FL	Zip Cod	e
8. The above		omits this statement for	the purpose of changing it		ed Office or regis	, <u></u>		n the State o		DATE	·	
Tax filing r	oration is eligible requirement and r ria on back)	to satisfy its Intangible elects to do so.	After MAY 1, 2	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			1	on Campaig Fund Contrib		ıg 🛮		May Be
11.		OFFICERS AND D	DIRECTORS	12.		AD	DITIONS/CH	ANGES TO	OFFICER	SAND	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, CAR 9050 LAKEVI NEW PORT I		☐ Delete							_	☐ Change	Addition
TITLE NAME Street Address City-St-Zip			☐ Delete								☐ Change	Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			r www.m. "	,			3	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1	-					☐ Change	☐ Additio
TITLE			☐ Delete								☐ Change	Additio
name Street address City-St-Zip					1				_			

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #