FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P9400071087** (8)

CAUGHENBAUGH ENTERPRISES, INC.

Principal Place	e of Business	Mailing Address							
6166 TAYLOR RD.		6166 TAYLOR RD.							
SUITE 101 NAPLES FL 33942		SUITE 101 NAPLES FL 34109-1823							
US		US				3. Date Incorporated or Qualified			
O Delaninal P	lace of Business	2a. Mailing Address				4. FEI Number	04/20		plied For
21	MA DI LIUSII ICOS	26				65-0525546			t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				03 0323340		\$8.75	
22		27				Certificate of Status Desired		Fee Re	
City & State	e	City & State				6. Election Campaign Financing		\$5.00	
23		28				Trust Fund Contribution		Added 1	
Zip	Country	Zip Country				8. This corporation has liability for i			
24	25 29		30				Yes 🔲		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
9. Name and Address of Current						10. Name and Address of New Registered Agent			
CAUGHENBAUGH, TIMOTHY					Name				
	S TAYLOR RD.		82 Street Add			ddress (P.O. Box Number is Not Acceptab	(0)		
	E 101	62 Street Ad			SHOULA	odiess (F.O. Box Number is Not Acceptab	10)		
	LES FL 33942			83					
				84	-0			1	0. 1
				84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050:	2 and 607.1508, Florida Statu	ites, the	above	e-named c	corporation submits this statement for the p	urpose of c	hanging ir	s registered
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was ilions of, Section 607.0505, F	authoria Iorida Si	red by latutes	the corpo	oration's board of directors. I hereby accep	t the appor	ntment as	registered
SIGNATURE	•	,							
SIGNATURE	Signature, typed or printed name of registered age	=	ilt: Registe	red Age	ne signature r	equired when reinstating)	DATE		
12.	OFFICERS AND		13			ADDITIONS/CHANGES TO OFFIC			
TITLE	D	☐ D€L€TE		1.1 TITLE		•	L	Change	Addition
NAME	CAUGHENBAUGH, TIMOTHY			NAME	i				
STREET ADDRESS	6166 TAYLOR ROAD	1.3 \$		1.3 STREET ADDRESS					
CITY-ST-ZIP	NAPLES FL 33942			1.4 CHY- S1 - 7IP					
TITLE .		· · · · · · · · · · · · · · · · · · ·		2.1 TiTL€			Ĺ	_] Change	Addition
NAME .			2.7	NAME					
STREET ADDRESS			2.3	STREET	ADDRESS	4.4			
CHTY-ST-ZIP		2.4 CI			S1 - 21P				
TITLE		1		3.1 TITLE			L	Change	Addition
NAME			3.2	NAME					
STREET ADDRESS					ADDRESS				
City-St-ZiP		- December		. CITY- S	ST-ZIP			7 &	111111111111111111111111111111111111111
TITLE	1	☐ DELETE	1	TITLE	1		L	Change	Addition
NAME				2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP_				CITY-S	1 - ZIP			10:	1,000
TITLE '		☐ DELET E	- 1	TITLE	-		Ĺ	Change	☐ Addition
NAME			. E	NAME					
STREET ADDRESS	•				ADDRESS				
CITY-ST-ZIP		Пошта		CITY-S	T-ZIF		·	7.05	1 3 200
TITLE		☐ DELETE		TITLE	ļ		L	Change	Addition
NAME			1	NAME	1				
STREET ADDRESS			63	STREET	ADDRESS				

14. I do 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.

TIMOTHY

CAUGHENBAUGH