## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)** P95000008790

DOCUMENT # 1. Entity Name

CHARIOT EAGLE-WEST, INC.



**FILED** Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90167 032 \*\*\*158.75

						NE WE THE							
Principal Plac 8100 W BUCK PHOENIX AZ		Mailing Address 107 NE 1ST AVE. OCALA FL 34470											
2. Principal F	Place of Business	<b>3.</b> Mai	3. Mailing Address										
Suite, Apt.	. #, etc.	Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAK	KING CHA	NGES				
City & Stat	te	City	City & State				4. FEI Number 59-3303270 Applied For				]		
Zip Country			Zip	Zip Coun			5: (	-5. Certificate of Status Desired X			Not Applicable  3.75 Additional e Required		
	6. Name an	nt Registere	L Registered Agent			7. Name and Address of New Registered Agent							
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HALDIN, WILLIAM C JR. 808 S.E. FT. KING ST.						Street Address (P.O. Box Number is Not Acceptable)							
OCALA FI											~~	1	
OUALA FI	L 3447 I												
						City			FL   Zi	ip Code	е	] .	
8. The above	named entity su	bmits this statement	for the purp	ose of changing its	register	l ed office or regi	stered an	ent, or both, in the State of Florida. I		r with	and accent	┨	
	tions of registere			ooo or orieriging no	rogisto.	o o o rog.	otorou ug	one, or boar, in the state of Florida.	arr rarma	, ,,,,,,,	апа авворі		
SIGNATURE .	Signature, typed or pr	inted name of registered age	ent and title if app	licable. (NOTE	: Registere	d Agent signature req	juired when re	einstating) DA	ATE.				
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Financing     Trust Fund Contribution.			<b>0</b> May Be to Fees		
10.		OFFICERS AN	1	RS	11.		AD	L DDITIONS/CHANGES TO OFFICERS.	AND DIRE	CTORS	S IN 11	-	
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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. (352)

SIGNATURE: 1

Robert P. Holliday 1/13/03 629-7007