

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90703 041 ***150.00

DOCUMENT # P95000056901

1. Entity Name
 CHEC-POINT FINANCIAL SERVICES, INC.

Principal Place of Business
 124 ROBIN ROAD
 1800
 ALTAMONTE SPRINGS FL 32715
 US

Mailing Address
 453 VILLAGE VIEW LANE
 LONGWOOD FL 32779
 CHANLE



DO NOT WRITE IN THIS SPACE

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	Applied For
59-3325386	Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
 COKE, V. SUE
 453 VILLAGE VIEW LANE
 LONGWOOD FL 32779

7. Name and Address of New Registered Agent
 Name: FRANCISCO J. CHAUX
 Street Address (P.O. Box Number is Not Acceptable): 124 ROBIN RD
 Suite 1800
 City: ALTAMONTE SPRINGS FL Zip Code: 32715

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.

SIGNATURE: FRANCISCO J. CHAUX
 Signature typed or printed name of registered agent and title if applicable

[Signature]
 Registered Agent's signature required when filing statement

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002, Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		
TITLE	PD	☐ Delete
NAME	THELEN, THOMAS P	
STREET ADDRESS	453 VILLAGE VIEW LANE	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	VPD	☐ Delete
NAME	COKE, V. SUE	
STREET ADDRESS	453 VILLAGE VIEW LANE	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	TD	☒ Delete
NAME	COKE, JOE E.	
STREET ADDRESS	453 VILLAGE VIEW LANE	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	SD	☒ Delete
NAME	COKE, JOANN R.	
STREET ADDRESS	453 VILLAGE VIEW LANE	
CITY - ST - ZIP	LONGWOOD FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Change ☒ Addition
NAME	JOHN ALTMANN	
STREET ADDRESS	2537 MAITLAND WAY	
CITY - ST - ZIP	ORLANDO FL 32810 APR 12 2003	
TITLE	VPD	☐ Change ☒ Addition
NAME	CARLOS J. CHAUX	
STREET ADDRESS	524 CAPE COD LANE	
CITY - ST - ZIP	ALTAMONTE SPRINGS, FL 32714	
TITLE	VPD	☐ Change ☒ Addition
NAME	FRANCISCO J. CHAUX	
STREET ADDRESS	2537 MAITLAND WAY	
CITY - ST - ZIP	ORLANDO, FL 32810 APR 12 2003	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: JOHN ALTMANN *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)