## **2000 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000005854

CHIDESTER/JOHNSTONE GROUP, INC.

Principal Place of Business

Mailing Address

2808 BAYPOINTE CIR TAMPA FL 33611

2808 BAYPOINTE CIR TAMPA FL 33611-2845

## **FILED** Mar 08, 2000 8:00 am Secretary of State

03-08-2000 90057 048 \*\*\*150.00



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2. Principal Place of Business 3. Mailing Address 10020 VAAUT ALLO DOUGE SOUTH									
10038 YACHT CLUB DRIVE SOUTH Suite, Apt. #, etc.		10038 YACHT CLUB DR, SOUTH Suite, Apt. #, etc.			DO NOT WRIT	E IN THIS SPA	ACE.		
Suite, Apt.	π, σιο.	duite, Apr. #, crc.		ļ	DO NOT WITH		NOL.		
City & State	RE ISL. FL	TREASURE ISL., FL		4.	FEI Number <b>59-335663</b> 3			plied For t Applicable	}
33706 PINELLAS		<sup>Zip</sup> 33706	PINEU	18 5. 6	Certificate of Status Desired		3.75 Add	litional	1
25 101		Ĺ <u></u> _	PINELL	<u> </u>		Fee	e Required	<del></del>	-
6. Name and Address of Current Registered Agent				V 1.1	7. Name and Address of New Registered Agent				
CHILDESTER, KAY A				Name KAY A. CHIDESTER					
	BAYPOINTE CIR	Street Address (		ddress (P.O. B	s (P.O. Box Number is Not Acceptable)				
	PA FL 33611			a VAX	ACHT CLUB DR. SOUTH				1
		City	City - O . A						
					RE BLAND	FL	_33	706	]
8. The above	named entity submits this statement for	the purpose of changing its r	registered office or	registered ag	ent, or both, in the State of Flo		1		
•	Trans a Miller				3/5	100			
SIGNATURE.	Signature, types of printed name of registered agent an	d title if applicable. (NOTE:	: Registered Agent signate	ure required when re	einstating)	DATE	<u>t</u>		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! F Tax filling requirement and elects to do so. After MAY 1, 2000			1 EEE 10 61EA		[			<del></del>	1
			Y 1, 2000 Fee will be \$550.00		10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				
(See criter	ia on back)	Make Check Payable to Department of Sta		t of State	ate				
11.	OFFICERS AND D	DIRECTORS	12.	ΑC	DDITIONS/CHANGES TO OFF		-	S IN 11	] _
TITLE	D	☐ Delete	TITLE			•	Change	☐ Addition	0/0/
NAME	CHIDESTER, KAY A		NAME STREET ADDRESS	10038	YACHT CLUB D	RIVE SO	OUTH		7
STREET ADDRESS CITY-ST-ZIP	2808 BAYPOINTE CIR TAMPA FL 33611		CITY-ST-ZIP	TREAS	ORE ISLAND, 1	<b>元</b> 3	370	6	[
TITLE	D D	☐ Delete	TITLE			<u>_</u>	Change	Addition	è
NAME	CHIDESTER, DAVID L		NAME	1003	8 YACHT CL	UB DI	RIVE	SOUTH	╁
STREET ADDRESS	2808 BAYPOINTE CIR		STREET ADDRESS	TREA	SURE ISLAN	M EC	نکری	701	-
CITY-ST-ZIP	TAMPA FL 33611		CITY-ST-ZIP	1 ICM					-
TITLE	D	☐ Delete	TITLE				Change	☐ Addition	
NAME	JOHNSTONE; CHRIS-E		NAME STREET ADDRESS		• = '				
STREET ADDRESS CITY-ST-ZIP	1093 MUIRFIELD COURT TARPON SPRINGS FL 33589		CITY-ST-ZIP						
TITLE	D	Delete	TITLE				Change	Addition	1
NAME	JOHNSTONE, RAYMONDE	Delete	NAME			_			
STREET ADDRESS	1093 MUIRFIELD COURT		STREET ADDRESS						
CITY-ST-ZIP	TARPON SPRINGS FL 33589	·	CITY-ST-ZIP	<u> </u>					1
TITLE		☐ Delete	TITLE				Change	Addition	1
NAME			NAME CTREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	]					1
		□ De ete	TITLE	<del>                                     </del>			Change	Addition	1
TITLE NAME		□ De ete	NAME			_	a-		
CTRCCT ADDRESS			CTREET ADDRECC	Ī					

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

888-404-