

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000016106

1. Entity Name

COMMUNICATION MANPOWER, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90085 015 ***150.00

Principal Place of Business

1555 SOUTH BLVD
CHIPLEY FL 32428

Mailing Address

P.O. BOX 1037
CHIPLEY FL 32428-7037

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

59-3371172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLOYD, JENEE
1555 SOUTH BLVD
CHIPLEY FL 32428

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME TRAWICK, JAMES L JR
STREET ADDRESS 1340 PINEY GROVE ROAD
CITY-ST-ZIP CHIPLEY FL 32428

TITLE CEO ☒ Change ☐ Addition
NAME James L. Trawick, Jr.
STREET ADDRESS 1340 Piney Grove Road
CITY-ST-ZIP Chipley, FL 32428

TITLE VD ☐ Delete
NAME TRAWICK, JAMES J
STREET ADDRESS 1693 HWY 277
CITY-ST-ZIP CHIPLEY FL 32428

TITLE P ☒ Change ☐ Addition
NAME James J. Trawick
STREET ADDRESS 1693 Hwy 277
CITY-ST-ZIP Chipley, FL 32428

TITLE SD ☒ Delete
NAME TRAWICK, EMMA O
STREET ADDRESS 1340 PINEY GROVE ROAD
CITY-ST-ZIP CHIPLEY FL 32428

TITLE VP ☐ Change ☒ Addition
NAME Douglas H. Trawick
STREET ADDRESS 620 Candy Kitchen Road
CITY-ST-ZIP Chipley, FL 32428

TITLE TD ☐ Delete
NAME FLOYD, JENEE T
STREET ADDRESS 1902 LIMESTONE LANE
CITY-ST-ZIP CHIPLEY FL 32428

TITLE VP/S/T ☒ Change ☐ Addition
NAME Jenee T. Floyd
STREET ADDRESS 1902 Limestone Lane
CITY-ST-ZIP Chipley, FL 32428

TITLE VD ☐ Delete
NAME TRAWICK, CARLOS P
STREET ADDRESS 1839 SWEET BAY ROAD
CITY-ST-ZIP CHIPLEY FL 32428

TITLE VP ☒ Change ☐ Addition
NAME P. Carlos Trawick
STREET ADDRESS 1839 Sweet Bay Road
CITY-ST-ZIP Chipley, FL 32428

TITLE VD ☐ Delete
NAME TRAWICK, KENNETH W
STREET ADDRESS 1850 LASTER ROAD
CITY-ST-ZIP CHIPLEY FL 32428

TITLE VP ☒ Change ☐ Addition
NAME Kenneth W. Trawick
STREET ADDRESS 1850 Laster Road
CITY-ST-ZIP Chipley, FL 32428

13. 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.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James J. Trawick 3/29/00 850-638-0406

Date

Daytime Phone #

CR2E034 (9/99)