

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State

04-06-2001 90067 030 ***150.00

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DOCUMENT # P96000030631

1. Entity Name
KEITH CORMIER, INC.

Principal Place of Business
**2555 S. ATLANTIC AVE., # 1402
DAYTONA BEACH FL 32118-5531**

Mailing Address
**2555 S. ATLANTIC AVE., # 1402
DAYTONA BEACH FL 32118-5531**

2. Principal Place of Business
3024 Parkway Blvd.

3. Mailing Address
SAME

Suite, Apt. #, etc.
303

Suite, Apt. #, etc.

City & State
Kissimmee,

City & State

Zip Country
FL. USA

Zip Country
34747

4. FEI Number **59-3376686**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CLARK, JOSEPH P
533 N. NOVA RD., STE. 115
ORMOND BEACH FL 32174**

7. Name and Address of New Registered Agent

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, 2001 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 **PVST** ☐ Delete
NAME **CORMIER, KEITH J**
STREET ADDRESS **2555 S. ATLANTIC AVE., STE. 1402**
CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE **D** ☐ Delete
NAME **CORMIER, KEITH J**
STREET ADDRESS **2555 S. ATLANTIC AVE., STE. 1402**
CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **Keith Cormier**
STREET ADDRESS **3024 Parkway Blvd., Apt. # 303**
CITY-ST-ZIP **Kissimmee, Fl. 34747**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 an other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/00)