

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90094 041 ***150.00

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1. Entity Name
STATEWIDE CAPITAL INVESTMENTS, CORP.



Principal Place of Business
2225 CURRY FORD ROAD
STE B
ORLANDO, FL 32806

Mailing Address
2225 CURRY FORD ROAD
STE B
ORLANDO, FL 32806

50011310



02012005 Chg-P CR2E034 (10/03)

2. Principal Place of Business
1604 S. Bumby Ave
Suite, Apt. #, etc.
Orlando, FL 32806
City & State

3. Mailing Address
1604 S. Bumby Ave
Suite, Apt. #, etc.
Orlando, FL
City & State

Zip
32806

Country *USA*
Orange

Zip
32806

Country *USA*
Orange

4. FEI Number
59-3404709

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CULBERTSON, GREG
2225 CURRY FORD ROAD
STE B
ORLANDO, FL 32806

7. Name and Address of New Registered Agent

Name *Culbertson, Greg*
Street Address (P.O. Box Number is Not Acceptable)
1604 S. Bumby Ave
City *Orlando* FL Zip Code *32806*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Greg Culbertson

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

(NOTE: Registered Agent signature required when reinstating)

2-1-05

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE *P* ☐ Delete
NAME ZEGERS, BERTON
STREET ADDRESS 20 BATTLER ST
CITY-ST-ZIP ORLANDO, FL 32828

TITLE *VP* ☐ Delete
NAME CULBERTSON, GREGORY
STREET ADDRESS 15531 PEBBLE RIDGE ST
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE *V.P* ☒ Change ☐ Addition
NAME *Culbertson, Gregory*
STREET ADDRESS *1240 Winter Garden Vineland Rd, 57*
CITY-ST-ZIP *Winter Garden, FL 34787*

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

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

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

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

12. 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.

SIGNATURE:

Greg Culbertson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-05
Date

407-898-2707
Daytime Phone #