

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90016 008 ***150.00

0448761 AV

DOCUMENT # P96000062074

1. Entity Name

CHOWDER & MORE, INC.

Principal Place of Business

**4801 37TH STREET SOUTH
ST. PETERSBURG FL 33714**

Mailing Address

**4801 37TH STREET SOUTH
ST. PETERSBURG FL 33714**

2. Principal Place of Business

NONE

Suite, Apt. #, etc.

3. Mailing Address

809 Druid Road EAST

Suite, Apt. #, etc.

City & State

Clearwater, FL

Zip

Country

Zip

Country

3375

USA

4. FEI Number

59-3391849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NOWORYTA, LADONNA

**4801 37TH STREET SOUTH
ST. PETERSBURG FL 33714**

7. Name and Address of New Registered Agent

Name **STEVEN WATTS**

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

809 DRUID ROAD EAST

City

Clearwater

FL

Zip Code

3375

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

Ladonna Noworyta, President

3/16/02

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, 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 **D** ☐ Delete
NAME **NOWORYTA, LADONNA**
STREET ADDRESS **4801 37TH STREET SOUTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33714**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
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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 **PRESIDENT** ☒ Change ☐ Addition
NAME **NOWORYTA, LADONNA**
STREET ADDRESS **809 DRUID ROAD EAST**
CITY-ST-ZIP **Clearwater, FL 3375**

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

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

TITLE ☐ Change ☐ Addition
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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)(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:

Ladonna Noworyta, President

3/16/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)