

2000 UNIFORM BUSINESS REPORT (UBR).

DOCUMENT # P96000104097

1. Entity Name

CHRISTINE WEST COAST INC.

FILED

Jul 24, 2000 8:00 am
Secretary of State

07-24-2000 90014 050 ***150.00

Principal Place of Business

~~572 SUTHERLAND BAYOU~~
PALM HARBOR FL 34683

US New Street Name after Sept. 1:
572 Ryan's Woods Lane

Mailing Address

PO BOX ~~666~~ 688
OZONA FL 34660

US AFTER SEPT. 1, 2000:
MAILING: 572 Ryan's Woods Lane
Palm Harbor, FL 34683

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 **59-3415238**

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

COLLIER, JAMES H SR
7421 BENT OAK DR
PORT RICHEY FL 34668

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **P** ☐ Delete
NAME **CHRISTINE FORLIZZO**
STREET ADDRESS **PO BOX ~~666~~ 688**
CITY-ST-ZIP **OZONA FL 34660**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Christine Forlizzo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/00 727 785-2932
Date Daytime Phone #

CR21034/5/00

Attachment
B# 09/000010407:
DW 13816

Christine West Coast, Inc.

FEI # 59-3415238

P.O. Box 688

Ozona, Florida 34660

1-727-773-2150

1-727-773-2151 Facsimile

After Sept. 1, 2000

New street name for place
of business and mailing address;

572 Ryan's Woods Lane
Palm Harbor, FL. 34683

DIVISION OF CORPORATIONS
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2000 Uniform Business Report

To Whom It May Concern:

We have received a second notice for payment when in fact we never received the first notice.

We changed addresses in late January and I believe this may have contributed to the delay in our payment we expected to make the first of the year, given proper notice.

You will notice on the forms, enclosed, that the address has changed and a payment for the standard \$150.00 is also included.

We am in hopes that this error can be overlooked due to our change of business address and the \$150.00 is an acceptable payment in lieu of all the confusion with the mail.

Sincerely,

Christine F. Marrone