

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000041892

1. Entity Name

CEDAR BAY LAND HOLDING COMPANY, INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90058 014 ***150.00

Principal Place of Business

Mailing Address

365 5TH AVE SO
STE 201
NAPLES FL 34102
US

365 5TH AVE SO
STE 201
NAPLES FL 34102-6575
US

2. Principal Place of Business

3. Mailing Address of David Nassif Co.

Suite, Apt. #, etc.

195 Worcester Street
Suite, Apt. #, etc.
Suite 301

City & State

City & State
Wellesley Hills, MA

Zip

Country

Zip

Country

02481

USA

4. FEI Number

52-2040328

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

CHEFFY, LOUIS W
821 5TH AVE SO
STE 201
NAPLES FL 34102

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PTSD	ANTARAMIAN, JACK J	365 5TH AVE SO STE 201	NAPLES FL 34102	<input type="checkbox"/>
VD	NASSIF, DAVID E	365 5TH AVE SO STE 201	NAPLES FL 34102	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD	NASSIF, DAVID E.	195 WORCESTER STREET-SUITE 301	WELLESLEY, MA-02481	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

David E. Nassif
APR 27, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)