

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000064531

1. Entity Name

CASCADE INTERNATIONAL, INCORPORATED

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90060 006 \*\*\*150.00

Principal Place of Business

14100 ROANVER CT  
 CENTERVILLE VA 20121  
 US

Mailing Address

14100 ROANVER CT  
 CENTERVILLE VA 20121  
 US

2. Principal Place of Business

1812 OLIVE CIRCLE

3. Mailing Address

1812 OLIVE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

APOPKA FLORIDA

City & State

APOPKA FLORIDA

Zip

Country

32703 - - -

USA - - - - -

Zip

Country

32703

USA - - - - -

4. FEI Number

59-3460218

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

BENTLEY, CHRISTOPHER G  
 1812 OLIVE CIRCLE  
 APOPKA FL 32203

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]*

CHRISTOPHER G. BENTLEY (AGENT) 4-30-00

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 ☐ Delete  
 NAME P  
 STREET ADDRESS SWANSON, WILLIAM C  
 CITY-ST-ZIP 14100 ROAMOR CT  
 CENTERVILLE VA 20121

TITLE ☐ Change ☒ Addition  
 NAME V.P.  
 STREET ADDRESS CHRISTOPHER G. BENTLEY  
 CITY-ST-ZIP 1812 OLIVE CIRCLE  
 APOPKA, FL 32703

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

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:

*[Signature]*

CHRISTOPHER G. BENTLEY (U.A.) 4300(107)880 9141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)