

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000071822

1. Entity Name

CW-DESIGNS, INC.

R

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90016 027 ***150.00

Principal Place of Business

1626 TAYO LANE
JACKSONVILLE FL 32223

Mailing Address

1626 TAYO LANE
JACKSONVILLE FL 32223

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 **59-3475573**

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

AKEL, DANIEL D
ONE INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE FL 32202

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

TITLE **D** ☐ Delete
NAME **HILL, KENNETH**
STREET ADDRESS **1626 TAYO LANE**
CITY-ST-ZIP **JACKSONVILLE FL 32223**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

SIGNATURE OF OFFICER
Ann F. Hill
Treasurer

9/8/00

904-268-7542

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
D# 997000071822
DW 84/874

Divisions of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

RE: CW DESIGNS, INC.
FEI #: 59-3475573

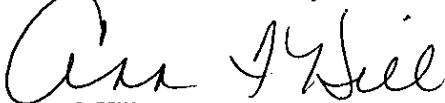
Dear Sir or Madam:

I spoke with a representative in your office today regarding the filing of the Uniform Business Report for our company. We have no record of having received an earlier notice for the filing. We have a bookkeeper that prepares all of our reports, i.e., Intangible Tax etc., and he has no record of it either. Our mail is delivered to a central location that has 10 boxes and, occasionally, we do receive other's mail. Normally, everyone is very good at ensuring the mail gets to the proper owner. I have no explanation for the fact that we did not receive it.

I am respectfully requesting your consideration in accepting the standard filing fee of \$150.00. We are a small company and try diligently to be a responsible corporate citizen.

Please let me know if I can provide any additional information. I am available, at your convenience, if you would like to discuss this issue personally.

Thank you, in advance, for your consideration.



Ann F. Hill, Treasurer
CW Designs, Inc.
1626 Tayo Lane
Jacksonville, FL 32223