

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90020 046 ***150.00

DOCUMENT # P97000089757

1. Entity Name
CHINO ISLAND, INC.

Principal Place of Business

1010 SW 22ND TERR
 CAPE CORAL FL 33991

Mailing Address

PO BOX 1155
 CAPE CORAL FL 33910-1100

2. Principal Place of Business

2126 SW 13th Ave.
 Suite, Apt. #, etc.

3. Mailing Address

PO BOX ~~1155~~
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Cape Coral, FL
 Zip
33991 - Country
USA

City & State
Cape Coral, FL
 Zip
33910 - Country
USA

4. FEI Number **65-0782378**
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GUNNING, DONALD K
 1010 SW 22ND TERR
 CAPE CORAL FL 33991

7. Name and Address of New Registered Agent

Name **Donald K Gunning**
 Street Address (P.O. Box Number is Not Acceptable)
2126 SW 13th Ave
 City **Cape Coral** FL Zip Code **33991**

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 _____ (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	D GUNNING, DONALD K 2126 SW 13TH AVE CAPE CORAL FL 33991 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JABLONSKI, JOSEPH H 7409 DANR-LIN CIRCLE NORTH.FT. MYERS FL 33917 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Donald K Gunning Date: 5/30/00 Daytime Phone #: 941-458-3988