

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90030 001 ***150.00

DOCUMENT # P98000001222

1. Entity Name

CHESAPEAKE ATLANTIC PROPERTIES, INC.

Principal Place of Business

Mailing Address

601 N. ASHELY DR., SUITE 1200
 TAMPA FL 33602

601 N. ASHELY DR., SUITE 1200
 TAMPA FL 33602

80049100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

601 N. Ashley Dr

601 N Ashley Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste 1200

Ste 1200

City & State

City & State

Tampa FL

Tampa FL

4. FEI Number

65-0813857

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

~~STRASKE, STEPHEN B II
 101 E. KENNEDY BLVD.
 TAMPA FL 33602~~

Name **Greg Hughes**

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

601 N. Ashley Dr.
 12th Floor

City **TAMPA**

FL

Zip Code **33602**

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/20/01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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
PDS	HUGHES, GREGORY L	220 E. MADISON ST. #1200	TAMPA FL 33611	<input type="checkbox"/>
				<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
President	Hughes, Greg	601 N. Ashley Dr 12 th FL	Tampa FL 33602	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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] President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

DATE

813-225-1141

Daytime Phone #

CR2E034 (10/00)

038 115