

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000038228

1. Entity Name

C.H.L. PROPERTIES INC.

APPROVED
AND
FILED

00 JUN 26 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business THE OAKS APARTMENTS 1619 LAKE AVE TALLAHASSEE FL 32310	Mailing Address THE OAKS APARTMENTS 1619 LAKE AVE TALLAHASSEE FL 32310-5748
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2. Principal Place of Business Colonnade Apartments Suite, Apt. #, etc. 1616 McCall Ave # D103 Tallahassee Florida	3. Mailing Address Colonnade Apartments Suite, Apt. #, etc. 1616 McCall Ave # D103 Tallahassee FL
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Zip 32310	Country Leon	Zip 32310	Country Leon
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4. FEI Number 59-3516838	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent COPELAND, DAVID B 2112 WEMBLEY WAY TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent 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 *David B. Copeland* **4/26/00**
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

TITLE P	<input type="checkbox"/> Delete
NAME COPELAND, DAVID B	
STREET ADDRESS 2112 WEMBLEY WAY	
CITY-ST-ZIP TALLAHASSEE FL 32308	
TITLE Vice President	<input type="checkbox"/> Delete
NAME Copeland, Christopher P.	
STREET ADDRESS 3208 Robinhood Rd.	
CITY-ST-ZIP Tallahassee FL 32312	
TITLE Secretary	<input type="checkbox"/> Delete
NAME Harley, Kenneth R.	
STREET ADDRESS 1117 Rosewood Dr	
CITY-ST-ZIP Tallahassee FL 32301	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *David B. Copeland* **4/26/00** **8505254833**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED

To: Division of Corporations

From: CHL Properties Inc.

June 20, 2000

To Whom It May Concern:

We submitted our corporate renewal packet along with check #354 in the amount of \$150.00 on April 27 2000 by mail. On June 19, 2000 we attempted to obtain a list of our corporate officers for legal purposes and were informed that the renewal was not received by your office. We then contacted our accountants and were informed that check #354 had not cleared. Consequently, we are requesting that you waive the \$400 late fee and accept our renewal payment of \$150.00. I would like to point out that we have never been late on any other renewal of any other license. We have stopped payment on the old check and have resubmitted check #1281. Please contact me if any other information is needed. Thank you.

Sincerely,

David Copeland
President