

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053323

1. Entity Name

CHASE MORGAN CORPORATION

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 90370 029 \*\*\*550.00

Principal Place of Business

10 SEAGATE DRIVE PH-2N  
NAPLES FL 34103

Mailing Address

10 SEAGATE DRIVE PH-2N  
NAPLES FL 34103

550722



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13631 Pondview Circle

Suite, Apt. #, etc.

3. Mailing Address

P. O. Box 7219

Suite, Apt. #, etc.

City & State

Naples, FL 34119

Zip

Country

City & State

Naples, FL 34101

Zip

Country

4. FEI Number 59-3516251

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

COLEMAN, KEVIN G ESQ  
4001 TAMiami TRAIL NORTH  
SUITE 300  
NAPLES FL 34103

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, 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, 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 PD  
NAME GOW, KAY F  
STREET ADDRESS 10 SEAGATE DRIVE PH-2N  
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 13631 Pondview Circle  
CITY-ST-ZIP Naples, FL 34119

TITLE SD  
NAME GOW, ROBERT T  
STREET ADDRESS 10 SEAGATE DRIVE PH-2N  
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 13631 Pondview Circle  
CITY-ST-ZIP Naples, FL 34119

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kay F. Gow

05-07-01

Date

941/450-8898

Daytime Phone #

CR2E034 (10/00)