

2000 UNIFORM BUSINESS REPORT (UBR)

5

DOCUMENT # P99000028729

1. Entity Name

C & E INVESTMENTS, INC.

FILED
Jun 07, 2000 8:00 am
Secretary of State

05-09-2000 90027 045 ***150.00

Principal Place of Business Mailing Address
1031 WEST MORSE BOULEVARD, SUITE 200 1031 WEST MORSE BOULEVARD, SUITE 200
WINTER PARK FL 32789-3750 WINTER PARK FL 32789-3750

2. Principal Place of Business Suite, Apt. #, etc.
3. Mailing Address Suite, Apt. #, etc.

City & State City & State
Zip Country Zip Country

4. FEI Number 59-3569649 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

GRAHAM, JESSE E ESQUIRE
369 NORTH NEW YORK AVENUE
THIRD FLOOR
WINTER PARK FL 32789

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

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	D	<input checked="" type="checkbox"/> Delete
NAME	EDDY, CARSON L	
STREET ADDRESS	1031 WEST MORSE BOULEVARD, SUITE 200	
CITY-ST-ZIP	WINTER PARK FL 32789-3750	
TITLE	D	<input type="checkbox"/> Delete
NAME	CUTHILL, R W JR	
STREET ADDRESS	1031 WEST MORSE BOULEVARD, SUITE 200	
CITY-ST-ZIP	WINTER PARK FL 32789-3750	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	INCINELLI, VICTOR	
STREET ADDRESS	1031 WEST MORSE BOULEVARD, SUITE 200	
CITY-ST-ZIP	WINTER PARK FL 32789-3750	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HARP, HARRY E	
STREET ADDRESS	1031 WEST MORSE BOULEVARD, SUITE 200	
CITY-ST-ZIP	WINTER PARK FL 32789-3750	
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
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (9/99)