

# 2000 UNIFORM BUSINESS REPORT (UBR)

4/

DOCUMENT # P99000033174

1. Entity Name

CORNERSTONE REAL ESTATE AND INVESTMENT, INC.

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90020 023 \*\*\*150.00

Principal Place of Business

1544 EAST BLVD.  
MAITLAND FL 32751

Mailing Address

1544 EAST BLVD.  
MAITLAND FL 32751-3540

2. Principal Place of Business

250 Wilshire Blvd.

Suite, Apt. #, etc.

Ste. 110

City & State

Casselberry, FL 32707

Zip

32707

Country

USA

3. Mailing Address

250 Wilshire Blvd.

Suite, Apt. #, etc.

Ste. 110

City & State

Casselberry, FL

Zip

32707

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3571587

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCKAY, STACEY L  
1544 EAST BLVD.  
MAITLAND FL 32751

- See New  
Address

7. Name and Address of New Registered Agent

Name

Stacey L. McKay

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

116 Leon Ct.

City

Fern Park

FL

Zip Code

32730

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	Stacey McKay	116 Leon Ct.	Fern Park, FL 32730		
	John McKay	116 Leon Ct.	Fern Park, FL 32730		

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

4-10-2000

Date

Daytime Phone #

407-834-9030

CR2E034 (9/99)