

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000054461

FILED  
Apr 23, 2002 8:00 AM  
Secretary of State

Entity Name: CB COUNTRYSIDE RESTAURANT CORP.

## Current Principal Place of Business:

KRESS BUILDING, SUITE M-8  
475 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 US

## New Principal Place of Business:

## New Mailing Address:

C/O ERNEST L. MASCARA, PA  
475 CENTRAL AVENUE, SUITE M8  
ST. PETERSBURG, FL 33701 US

## Current Mailing Address:

KRESS BUILDING, SUITE M-8  
475 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 US

FEI Number: 59-3582148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASCARA, ERNEST L  
KRESS BUILDING, SUITE M-8  
475 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete  
Name: LODER, MATTHEW  
Address: 401 GULF BLVD.  
City-St-Zip: INDIAN ROCKS BEACH, FL 34635 US

Title: VDS ( ) Delete  
Name: LODER, JOHN  
Address: 401 GULF BLVD  
City-St-Zip: INDIAN ROCKS BEACH, FL 34635 US

Title: VD ( ) Delete  
Name: LODER, GEORGE  
Address: 401 GULF BLVD  
City-St-Zip: INDIAN ROCKS BEACH, FL 34635 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VDS (X) Change ( ) Addition  
Name: POWERS, GREGORY  
Address: 401 GULF BLVD  
City-St-Zip: INDIAN ROCKS BEACH, FL 34635 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW LODER

P

04/23/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date