

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90020 025 ***150.00

0406010

DOCUMENT # P99000078391

1. Entity Name

C & L ENTERPRISES OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

455 CREEK LANE DR.
ENGLEWOOD FL 34223

Mailing Address

455 CREEK LANE DR.
ENGLEWOOD FL 34223

2. Principal Place of Business

204 37th Ave. N.

3. Mailing Address

204 37th Ave. N.

Suite, Apt. #, etc.

271

Suite, Apt. #, etc.

271

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33704-1416

Country

USA

Zip

33704-1416

Country

USA

4. FEI Number

65-0942426

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

IZZO, JOHN P
180 NO. INDIANA AVE., STE. #5
ENGLEWOOD FL 34223

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

Lorraine M. Vogel
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

2/16/01

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

TITLE PS
NAME HULLIN, CHERYL
STREET ADDRESS 455 CREEK LANE DR.
CITY-ST-ZIP ENGLEWOOD FL 34223 ☐ Delete

TITLE VP
NAME VOGEL, LORRAINE
STREET ADDRESS 897 BLUEBIRD DR.
CITY-ST-ZIP DELRAY BEACH FL 33444 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS
NAME Hullin, Cheryl
STREET ADDRESS 6357 Bahia Del Mar Blvd., Bldg. L, #210
CITY-ST-ZIP St. Petersburg, FL 33715 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Lorraine M. Vogel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/16/01

561-278-0736

CR2E034 (10/00)