

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000082966

1. Entity Name

CRESCENT MOON ENTERPRISES, INC.

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

03-12-2001 90491 041 \*\*\*158.75

Principal Place of Business

Mailing Address

1111-8TH AVE W  
BRADENTON FL 34205

1111-8TH AVE W  
BRADENTON FL 34205

2. Principal Place of Business

3. Mailing Address

10960 SR 70 EAST

10960 SR 70 EAST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SPRING FOREST OFFICE PARK

SPRING FOREST OFFICE PARK

City & State

City & State

BRADENTON, FL

BRADENTON, FL

Zip

Country

Zip

Country

34202

USA

34202

USA

4. FEI Number

65-0962296

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

FELDMAN, MARC H  
3908 26TH STREET WEST  
BRADENTON FL 34205

Name

Robert Greene, Esq.

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

1301 6th Ave. W, Ste 400

City

Bradenton

FL

Zip Code

34205

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 + 8.75**  
**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 P/D ☐ Delete  
NAME MANFULL, WILLIAM L  
STREET ADDRESS 4040 VERA BETHANY RD.  
CITY-ST-ZIP MYAKKA CITY FL 34251

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

TITLE V/D ☐ Delete  
NAME OGLES, MARK  
STREET ADDRESS 504-137TH ST E  
CITY-ST-ZIP BRADENTON FL 34202

TITLE P/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME PENDLEY, MICHAEL  
STREET ADDRESS 706-137TH ST E  
CITY-ST-ZIP BRADENTON FL 34202

TITLE S/D/T ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME OGLES, GEORGE  
STREET ADDRESS 603 PEBBLE BEACH CT  
CITY-ST-ZIP AUGUSTA GA 30907

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME CHUNG, FINE  
STREET ADDRESS 4424 FRUITVILLE ROAD  
CITY-ST-ZIP SARASOTA FL 34232

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: MARK OGLES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-6-01

941-752-3134

0010255

CR2E034 (10/00)