

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098524

1. Entity Name

COLKEL TITLE AGENCY, INC.

FILED

May 09, 2000 8:00 am
Secretary of State

05-09-2000 90074 034 ***150.00

Principal Place of Business

Mailing Address

10138 U.S. 19
PORT RICHEY FL 34668

10138 U.S. 19
PORT RICHEY FL 34668

2. Principal Place of Business

3. Mailing Address

15 South Blvd of the Presidents

clo Kelleher + Assoc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

17 British American Blvd.

City & State

Sarasota, Florida

City & State

Latham, N.Y.

4. FEE Number

59-3610178

Applied For

Not Applicable

Zip 34236

Country USA

Zip 12110

Country U.S.A.

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

SMITH, MARIE B

10138 U.S. 19

PORT RICHEY FL 34668

Name Russell D. Coleman

Street Address (P.O. Box Number is Not Acceptable)
7311 Rangit Drive

City

Sarasota

FL

Zip Code 34241

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 RUSSELL D COLEMAN

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD ☒ Delete
NAME SMITH, MARIE B
STREET ADDRESS 10138 U.S. 19
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~PSD~~ ☐ Change ☒ Addition
NAME Timothy P. Kelleher
STREET ADDRESS 8 Northview Drive
CITY-ST-ZIP Latham, N.Y. 12110

TITLE ☐ Change ☒ Addition
NAME Russell D. Coleman
STREET ADDRESS 7311 Rangit Drive
CITY-ST-ZIP Sarasota, Florida 34241

TITLE ☐ Change ☒ Addition
NAME Kay M. Coleman
STREET ADDRESS 160 Fairway Drive
CITY-ST-ZIP Novato, California 94949

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

TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Timothy P. Kelleher 4/27/00 (518) 786 3900

Date

Daytime Phone #

CR2E034 (9/99)