2001 UNIFORM BUSINESS REPORT (UBR)

Aug 13, 2001 8:00 am F Secretary of State P99000100828 **DOCUMENT #** 1. Entity Name CHARLES WINSTON ENTERPRISES, INC. Principal Place of Business Mailing Address 1316 CALADESI DRIVE 1316 CALADESI DRIVE **WESLEY CHAPEL FL 33543** WESLEY CHAPEL FL 33543 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3609292 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WINSTON, CHARLES Street Address (P.O. Box Number is Not Acceptable) 1316 CALADESI DRIVE **WESLEY CHAPEL FL 33543** City Zip Code FL 😿 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. O PRESIDENT + CEO TITLE ☐ Delete EXEC. V.P. ☐ Change X Addition CR2E034 (5/01 WINSTON, CHARLES NAME BRIAN SMITH 1316 CALADESI DRIVE STREET ADDRESS 189 SALISBURY DRIVE SASKATOON, SK 57H 4B7 CANADA STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL FL 33543 CITY-ST-ZIP TITLE Delete DIRECTOR TITI F ☐ Change Addition NAME NAME JERRY WINSTON STREET ADDRESS 5306 WINTERSET DRIVE GREENSBORD, NC 27406 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: