

# 2001 UNIFORM BUSINESS REPORT (UBR)

4/31

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90069 014 \*\*\*150.00

**DOCUMENT # P99000110469**

1. Entity Name

**CALDERIZZI, INC.**

Principal Place of Business

**4410 DUCAN RD.  
PUNTA GORDA FL 33982**

Mailing Address

**4410 DUCAN RD.  
PUNTA GORDA FL 33982**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

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

**SPANO, RONALD  
4410 DUCAN RD.  
PUNTA GORDA FL 33982**

Name

**SPANO, HEATHER**

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

**4410 DUNCAN RD.**

City

**PUNTA GORDA**

FL

Zip Code

**33982**

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

*William Curtis*  
Signature, typed or printed name of registered agent and date if applicable.

**WILLIAM CURTIS**  
(NOTE: Registered Agent signature required when reinstating)

**April 21, 01**  
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**  
**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	VSD	<input type="checkbox"/> Delete
NAME	SPANO, RONALD	
STREET ADDRESS	4410 DUCAN RD.	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE	PT	<input type="checkbox"/> Delete
NAME	SPANO, HEATHER	
STREET ADDRESS	4410 DUNCAN RD	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM CURTIS	
STREET ADDRESS	4410 DUNCAN RD.	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 line empowered.

SIGNATURE

*Ronald M. Spano*  
Signature and typed or printed name of signing officer or director

**RONALD M. SPANO**

**4/21/01**  
Date

**941-6395822**  
Daytime Phone #

CR2E034 (10/00)