

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S55645

1. Entity Name

CHEROKEE CONSTRUCTION OF THE PALM BEACHES, INC.

FILED
Feb 03, 2000 8:00 am
Secretary of State

02-03-2000 90031 011 ***150.00

Principal Place of Business

Mailing Address

1439 CREST DR.
LAKE WORTH FL 33461

1439 CREST DR.
LAKE WORTH FL 33418-8674

2. Principal Place of Business

3. Mailing Address

14554 Boxwood Dr
Suite, Apt. #, etc.

14554 Boxwood Dr
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Palm Bch Gdns, FL

Palm Bch Gdns, FL

4. FEI Number

65-0265261

Applied For

Not Applicable

Zip

Country

Zip

Country

33418-

USA

33418

USA

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

HEMMIS, WILLIAM A.
1439 CREST DRIVE
LAKE WORTH FL 33461

Name William A. Hemmis

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

14554 Boxwood Dr

Palm Bch Gdns

FL

Zip Code 33418

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

Wm. A. Hemmis Pres

1-17-2000

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
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 D
NAME MCCOY, KATHRYN G.
STREET ADDRESS 1 SABAL ISLAND DR
CITY-ST-ZIP OCEAN RIDGE FL ☐ Delete

TITLE D
NAME MCCOY Kathryn G.
STREET ADDRESS 14554 Boxwood Dr
CITY-ST-ZIP Palm Bch Gdns, FL 33418 ☒ Change ☐ Addition

TITLE D
NAME HEMMIS, WILLIAM A.
STREET ADDRESS 1439 CREST DR.
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

TITLE D, P
NAME Hemmis, William A
STREET ADDRESS 14554 Boxwood Dr
CITY-ST-ZIP Palm Bch Gdns FL 33418 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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 life empowered.

SIGNATURE:

Wm. A. Hemmis Pres 1-17-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)