

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90142 018 ***158.75

DOCUMENT # S81170

1. Entity Name
CFC UNIT 201 CORPORATION



Principal Place of Business
**1717 INDIAN RIVER BLVD
SUITE 300
VERO BEACH FL 32960
US**

Mailing Address
**1717 INDIAN RIVER BLVD 1405 82nd
STE 300 Avenue, #112
VERO BEACH FL 32960 32966
US**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
**1405 82nd Avenue
#112**

☒ CHECK HERE IF MAKING CHANGES

City & State
Vero Beach, FL

4. FEI Number
65-0281524

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SCHLITT, LOUIS L
1717 INDIAN RIVER BLVD
STE 300
VERO BEACH FL 32960**

7. Name and Address of New Registered Agent
Name
Malcolm C. Palmer
Street Address (P.O. Box Number is Not Acceptable)
**1405 82nd Avenue
#112
Vero Beach FL 32966**

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. I am familiar with, and accept the obligations of registered agent.
Malcolm C. Palmer
SIGNATURE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE **3-20-03**

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHLITT, LOUIS L 1717 INDIAN RIVER BLVD, STE 300 VERO BEACH FL 32960 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & Treasurer XX Change ☐ Addition Malcolm C. Palmer 1405 82nd Avenue, #112 Vero Beach FL 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President & Secretary Change XX Addition Patricia M. Palmer 1405 82nd Avenue, #112 Vero Beach, FL 32966
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Malcolm C. Palmer* **3/20/03 772-772-4410**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #