

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90043 020 ***150.00

DOCUMENT # V06914

1. Entity Name
C & H BASEBALL AND METALS, INC.

Principal Place of Business

~~15 PARADISE PLAZA~~
~~#133~~
~~SARASOTA FL 34230~~
~~US~~

Mailing Address

~~15 PARADISE PLAZA~~
~~#133~~
~~SARASOTA FL 34230~~
~~US~~

2. Principal Place of Business

Suite, Apt. #, etc.
620 4TH ST.

City & State
SANTA ROSA, CA.

Zip **95404** Country **USA**

3. Mailing Address

Suite, Apt. #, etc.
620 4TH ST.

City & State
SANTA ROSA, CA

Zip **95404** Country **USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0304814**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

GREEN, ROBERT R.
2215 60TH DR E
BRADENTON FL 34204

7. Name and Address of New Registered Agent

Name **ROB HUFF**
 Street Address (P.O. Box Number is Not Acceptable) **2215 60TH DR. EAST**
~~BRADENTON, FL 34204~~
 City **BRADENTON** FL **34204**

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 **ROB HUFF**

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

(NOTE: Registered Agent signature required when resigning)

DATE

4/28/01

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 **P** ☐ Delete
 NAME **GREEN, ROBERT**
 STREET ADDRESS **2215 60TH DR E**
 CITY-ST-ZIP **BRADENTON FL**

TITLE **C** ☐ Delete
 NAME **STAFFER, KATHLEEN**
 STREET ADDRESS **2215 60TH DR E**
 CITY-ST-ZIP **BRADENTON FL**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P.** ☒ Change ☐ Addition
 NAME **GREEN, ROBERT**
 STREET ADDRESS **620 4TH ST.**
 CITY-ST-ZIP **SANTA ROSA, CA, 95404**

TITLE **C** ☒ Change ☐ Addition
 NAME **SHAFER, KATHLEEN**
 STREET ADDRESS **620 4TH ST.**
 CITY-ST-ZIP **SANTA ROSA, CA, 95404**

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

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:

ROBERT R. GREEN

3/26/01 707-575-1260

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)