

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V18696

1. Entity Name

CHEER CONSOLIDATIONS, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90294 042 ***150.00

Principal Place of Business

4332 CAMINO MADERA
SUITE 2000
SARASOTA FL 34238
US

Mailing Address

4332 CAMINO MADERA
SUITE 2000
SARASOTA FL 34238
US

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 65-0318847

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

SCHWEIZER, ARTHUR M
4332 CAMINO MADERA
SUITE 2000
SARASOTA FL 34231

Name

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

City

FL

Zip Code

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

Signature typed or printed name of registered agent and title (if applicable)

(Not a Registered Agent's signature required when re-registering)

DATE

25 APR. 2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PD
SCHWEIZER, ARTHUR M
4332 CAMINO MADERA
SARASOTA FL 34238 ☐ Delete

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

TITLE
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SCHWEIZER, ARTHUR M
4332 CAMINO MADERA
SARASOTA FL 34238 ☐ Delete

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☐ 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT

CHEER CONSOLIDATIONS, INC.

4332 CAMINO MADERA

25 APR. 01 (94) 923-1114

Date Day-Mo-Year

cc: FILE

CR2E034 (10/00)