## 2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Apr 25, 2001 8:00 am Secretary of State DOCUMENT # V20542 COOLEY/ROJAS ENTERPRISES, INC. -25-2001 90173 030 \*\*\*150.00 Principal Place of Business Mailing Address 27341 GOLF COURSE LP 27341 GOLF COURSE LP WESLEY CHAPEL FL 33544 WESLEY CHAPEL FL 33541 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Country Zip **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COOLEY, KAREN C. Street Address (P.O. Box Number is Not Acceptable) 27341 GOLF COURSE LOOP WESLEY CHAPEL FL 33544 City Zio 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD TITLE ☐ Delete TITLE Change Addition COOLEY, MICHAEL J. NAME NAME STREET ADDRESS 27341 GOLF COURSE LOOP STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WESLEY CHAPEL FL ٧D ☐ Delete TITLE ☐ Change Addition TITLE NAME ROJAS, NEREO G. NAME STREET ADDRESS STREET ADDRESS 5315 WESLEY CHAPEL LOOP CITY-ST-ZIP CITY-ST-ZIP WESLEY CHAPEL FL ☐ Delete TITLE Change ☐ Addition TITLE COOLEY, KAREN C. NAME NAME STREET ADDRESS 27341 GOLF COURSE LOOP STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL FL CITY-ST-ZIP Defete Change Addition COOLEY, LINDA M. NAME STREET ADDRESS STREET ADDRESS 5315 WESLEY CHAPEL LOOP CITY-ST-ZIP CITY-ST-ZIP WESLEY CHAPEL FL

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.

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

SIGNATURE: SIGNATURE AND TYPEFOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

1-8-01

Daytime Phone #

Change

☐ Change

☐ Addition

☐ Addition

CR2E034 (10/0