2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State
05-08-2000 90050 016 ***158.75

DOCUMENT # P97000054600

1. Entity Name

CHICKADEE'S, INC.

Principal Place of Business	Mailing Address
2004 CASCADES DRIVE #7 NAPLES FL 34112	P. O. BOX 1709 NAPLES FL 21784-0301 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
156 Rehoboth Ave.	P.O. Box 958
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Rehoboth Beach, DE	City & State: REhoboth Beach, DE
Zip: 19971 Country: Sussex	Zip: 19971 Country: Sussex

4. FEI Number 65-0760347 ☐ 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
SEYMOUR, CAMILLA L 2004 CASCADES DRIVE #7 NAPLES FL 34112	Name: Laura Hernandez Street Address (P.O. Box Number is Not Acceptable): 3 Circle Drive City: Fort Myers, **FL** Zip Code: 33908

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: Camilla Seymour 4/24/00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEYMOUR, CAMILLA L 2004 CASCADES DRIVE #7 NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P. Seymour, Camilla L. #5 Sea Bright Way ~~Rehoboth Beach, DE. 19971~~	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. Hernandez, Laura L. 3 Circle Drive ~~Fort Myers,FL 33908~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/99)

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: Camilla Seymour 4/24/00 302-226-9556
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #