

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90035 033 ***150.00

DOCUMENT # G40024

1. Entity Name

OUGHTERSON, SUNDHEIM, AND WOODS, P.A.

Principal Place of Business

310 SW OCEAN BLVD.
STUART FL 34994-2007
US

Mailing Address

310 SW OCEAN BLVD
STUART FL 34994-2007
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 59-2293803

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

OUGHTERSON, WM. A.
310 SW OCEAN BLVD.
STUART FL 34994

Name

WALTER G WOODS

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

310 SW OCEAN BLVD

City

STUART

FL

Zip Code

34994

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

Walter G. Woods

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/9/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME OUGHTERSON, WM A
STREET ADDRESS 70 N RIVER RD
CITY-ST-ZIP STUART, FL 00000

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

TITLE ST ☐ Delete
NAME SUNDHEIM, JR., FREDERICK
STREET ADDRESS 47 SW RIVERWAY BLVD
CITY-ST-ZIP PALM CITY, FL 00000

TITLE P ☒ Change ☐ Addition
NAME FREDERICK G. SUNDHEIM, JR.
STREET ADDRESS 47 SW RIVERWAY BLVD.
CITY-ST-ZIP PALM CITY, FL 34990

TITLE V. ☐ Delete
NAME WOODS, WALTER G
STREET ADDRESS 32 CASTLE WAY
CITY-ST-ZIP STUART FL 34996

TITLE V.T/S ☒ Change ☐ Addition
NAME WALTER G. WOODS
STREET ADDRESS 32 CASTLE WAY
CITY-ST-ZIP STUART, FL 34996

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/9/01

Daytime Phone #

561-287-0660

CR2E034 (10/00)