

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # M00000000828

1. Entity Name
SGT LTD., LLC

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1500 WEST THIRD STREET
C/O KAY PERKINS
CLEVELAND OH 44113-1406

Mailing Address
1500 WEST THIRD STREET
C/O KAY PERKINS
CLEVELAND OH 44113-1406



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
720 Park Blvd
Suite, Apt. #, etc.

3. Mailing Address
720 Park Blvd
Suite, Apt. #, etc.
P.O. Box 73

City & State
Boise, ID 837

City & State
Boise, ID

4. FEI Number
82-0468958

Applied For
Not Applicable

Zip Country
83712 US

Zip Country
83729 US

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

10. ADDITIONS/CHANGES

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

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

G. S. Stevens
REGISTRAR

4/10/01 410-495-8102

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)

2 of 2

Directors, Officers Report

SGT Ltd.

March 27, 2001

EXECUTIVE OFFICERS

OFFICERS

Gary Stevens

Principal Financial Officer

Effective: December 01, 2000

Primary Address: None given

E. B. Abrams

Acting President

Effective: December 01, 2000

Primary Address: None given