

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2001 8:00 am
Secretary of State

01-13-2001 90001 037 ****61.25

A0003769



DO NOT WRITE IN THIS SPACE

DOCUMENT # N43725

1. Entity Name
SEBRING EAGLES, INC.

Principal Place of Business Mailing Address

12921 US 98 S 12921 US 98 S
 SEBRING FL 33871 SEBRING FL 33871
 US US

33876-9410 **33876-9410**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

33876-9410 **33876-9410** **33876-9410**

4. FEI Number Applied For

59-3001227 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

☐ ☐

6. Name and Address of Current Registered Agent

CARPENTER, WAYNE E
657 BUTTONWOOD DR
SEBRING FL 33872

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 *Wayne E Carpenter* DATE **1-5-01**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

☐ ☐

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	☐ Delete
NAME	CARPENTER, WAYNE	
STREET ADDRESS	657 BUTTONWOOD DR	
CITY-ST-ZIP	SEBRING FL 33872	
TITLE	T	☐ Delete
NAME	ALBERS, RICHARD	
STREET ADDRESS	209 SPARROW AV	
CITY-ST-ZIP	SEBRING FL 33870	
TITLE	T	☒ Delete
NAME	CHAMBERS, RAY	
STREET ADDRESS	PO BOX 174	
CITY-ST-ZIP	LORIDA FL 33857	
TITLE	T	☒ Delete
NAME	HOWARD, RAY	
STREET ADDRESS	10809 US 275	
CITY-ST-ZIP	SEBRING FL 33870	
TITLE	T	☒ Delete
NAME	SOLAR, IGY	
STREET ADDRESS	2509 OAK BEACH BLVD	
CITY-ST-ZIP	SEBRING FL 33870	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	ZIP = 33875-6215	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	ZIP = 33872-3732	
TITLE	TRUSTEE	☐ Change ☒ Addition
NAME	RICHARD HOFFHEIM	
STREET ADDRESS	3816 HOYT AVE.	
CITY-ST-ZIP	SEBRING, FL 33876-9465	
TITLE	TRUSTEE	☐ Change ☒ Addition
NAME	NICHOLAS DESANTA	
STREET ADDRESS	6438 6TH AVE W.	
CITY-ST-ZIP	SEBRING, FL 33876-5836	
TITLE	MANAGER	☐ Change ☒ Addition
NAME	CHARLES GEARY	
STREET ADDRESS	2225 BARBADOS AVE. W.	
CITY-ST-ZIP	SEBRING, FL 33872-4012	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wayne E Carpenter* DATE: **1-5-01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)