

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002257

1. Entity Name

SHO FU BONSAI SOCIETY OF SARASOTA, INC.

FILED

May 01, 2002 8:00 am
Secretary of State

05-01-2002 91531 028 ****61.25

Principal Place of Business C/O KEVING JEFFERS 4716 LARKRIDGE CIR SARASOTA FL 34233-1729	Mailing Address C/O KEVING JEFFERS 4716 LARKRIDGE CIR SARASOTA FL 34233-1729
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4508 WHIRLAWAY DR Suite, Apt. #, etc. SA City & State SARASOTA, FL Zip 34233 Country	3. Mailing Address 4508 WHIRLAWAY DR Suite, Apt. #, etc. SARASOTA City & State SARASOTA, FL Zip 34233 Country
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4. FEI Number 59-3583734	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JEFFERS, KEVIN 4716 LARKRIDGE CIR SARASOTA FL 34233-1729	7. Name and Address of New Registered Agent Name JEAN SCHNEEBERGER Street Address (P.O. Box Number is Not Acceptable) 4508 WHIRLAWAY DR City SARASOTA FL Zip Code 34233
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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 JEAN SCHNEEBERGER-T JEAN SCHNEEBERGER 4/15/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JEFFERS, KEVIN 4716 LARKRIDGE CIRCLE SARASOTA FL 34233-1729 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DON HILL 1529 DREW ST. CLEARWATER, FL 38755-6014 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BENNETT, LOIS 1728 LITTLE POINT CIR SARASOTA FL 34231 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BARBARA BAUMAN 2425 CLEMATIS ST. SARASOTA, FL 34239-4026 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KEAST, JIM 1600 MANOR RD ENGLEWOOD FL 34223-4930 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MAUREEN MORGAN 3224 AUSTIN ST. SARASOTA, FL 34231-8528 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SCHNEEBERGER, JEAN 4508 WHIRLAWAY DR SARASOTA FL 34233 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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

4/15/02

Date

Daytime Phone #

CR2E037 (9/01)