

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000069156 (5)

1. Corporation Name

SINGLETON BUSINESS ENTERPRISES, INC.

Principal Place of Business

590 CHELSEA RD
LONGWOOD FL 32750

Mailing Address

590 CHELSEA RD
LONGWOOD FL 32750

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

09/19/1994

4. FEI Number

59-3276953

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

SINGLETON, RUSSELL L
590 CHELSEA RD
LONGWOOD FL 32750

10. Name and Address of New Registered Agent

81 Name Sharon C. Singleton

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

590 Chelsea Rd.

83 Longwood

84 City Longwood

FL

85 Zip Code

32750

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Sharon C. Singleton Sharon C. Singleton p. 4-23-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SINGLETON, RUSSELL L
STREET ADDRESS 590 CHELSEA RD
CITY-ST-ZIP LONGWOOD FL 32750

TITLE VSTD
NAME SINGLETON, SHARON C
STREET ADDRESS 590 CHELSEA RD
CITY-ST-ZIP LONGWOOD FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PSTD
12 NAME SINGLETON, SHARON C.
13 STREET ADDRESS 590 CHELSEA RD
14 CITY-ST-ZIP LONGWOOD, FL. 32750

21 TITLE VD
22 NAME SINGLETON, DENISE V.
23 STREET ADDRESS 590 CHELSEA RD.
24 CITY-ST-ZIP LONGWOOD, FL. 32750

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sharon C. Singleton (SHARON C. SINGLETON) 4-23-98 260-6259

CR2E034 (10/97)