

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002247

1. Entity Name

S E D R A INC.

Principal Place of Business

C/O NORA K. MASK  
1598 E. SILVER STAR ROAD  
OCOE FL 34761

Mailing Address

C/O NORA K. MASK  
1598 E. SILVER STAR ROAD  
OCOE FL 34761

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 59-2580378

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

MASK, NORA K  
1598 E SILVER STAR RD  
OCOE FL 34761

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 \$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 PD  
NAME PENNINGTON, ADELE  
STREET ADDRESS 247 CEMETERY RD  
CITY-ST-ZIP FORT MC COY FL 32134 ☐ Delete

TITLE VPD  
NAME CLARK, CAROL  
STREET ADDRESS PO BOX 364  
CITY-ST-ZIP JUPITER FL 33468 ☒ Delete

TITLE SD  
NAME BELL, CINDY  
STREET ADDRESS RT 2 BOX 138-1  
CITY-ST-ZIP GREENVILLE FL 32331 ☒ Delete

TITLE TD  
NAME MASK, NORA  
STREET ADDRESS 1120 N LAKEWOOD  
CITY-ST-ZIP OCOEE FL 34761 ☐ Delete

TITLE ASD  
NAME THOMPSON, CAROL  
STREET ADDRESS PO BOX 302  
CITY-ST-ZIP MIMS FL 32754 ☐ Delete

TITLE RSD  
NAME HAWTHORNE, MARION  
STREET ADDRESS 13147 159TH ST NORTH  
CITY-ST-ZIP JUPITER FL 33478 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE VPD  
NAME GAYLE GARDNER  
STREET ADDRESS 5105 PORTER ROAD  
CITY-ST-ZIP ST. AUGUSTINE, FL 32096 ☒ Addition

TITLE SD  
NAME STACEY CAIN  
STREET ADDRESS 247 CEMETARY ROAD  
CITY-ST-ZIP SALT SPRINGS, FL 32134 ☒ 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

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: NORA K. MASK  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Jan 29, 2001 8:00 am  
Secretary of State

01-29-2001 90190 020 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

Attachment Doc# N99000002247

00009780

SEDRA Board of Directors 2000 - 2001

(additions to  
Blocks 10 & 11)

D Lynnette Burks  
13400 Running Water Road  
Palm Beach Gardens, FL 33418

D Becky Siler  
7241 County Road 561 S  
Clermont, FL 34711

D Pat Thomas  
2750 NE 114 Ave.  
Bronson, FL 32621

D Jodie Moore  
P.O. Box 424  
Lecanto, FL 34461