

2001 UNIFORM BUSINESS REPORT (UBR)

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

02-13-2001 90007 042 ****61.25

0087830

DOCUMENT # N11098

1. Entity Name

SEBRING MAIN STREET, INC.

Principal Place of Business

Mailing Address

**219 NORTH RIDGEWOOD DRIVE
P.O. BOX 1243
SEBRING FL 33871-1243**

**219 NORTH RIDGEWOOD DRIVE
P.O. BOX 1243
SEBRING FL 33871-1243**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2626645

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHOMMER, NICHOLAS G.
329 S. COMMERCE AVENUE
SEBRING FL 33870**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
PELLA, PATRICIA S
136 S. RIDGEWOOD DR.
SEBRING FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CROWDER, CRAIG
228 N. RIDGEWOOD DR.
SEBRING FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CLARK, JOHN
327 SE LAKEVIEW DRIVE
SEBRING FL 33870** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
HAMRIC, MIKE
2824 US 27 SOUTH
SEBRING FL 33870** ☐ 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:

SUPPLEMENTAL REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/01 **(863) 382-2770**
Date Daytime Phone #

CR2E037 (10/00)

2001 Uniform Business Report
Document #N11098

8/4/09
#N11098

Line 10, continued:

D
Sheila Scott
PO Box 3753
Sebring, FL 33871

D
Diane Juve
1123 Lake Lotela
Avon Park, FL 33825

D
Rick Demeri
4512 Sand Wedge Way
Sebring, FL 33870

SD
Sandy Smith
426 School St.
Sebring, FL 33870

D
Sandy Whidden
3514 Kenilworth Blvd
Sebring, FL 33870

D
Regina Blackman
PO Box 12
Sebring, FL 33871

D
Tim Albright
211 Cloverleaf Rd
Lake Placid, FL 33852

D
Tina McClelland
231 US 27 North
Sebring, FL 33870

D
Ruth Cukras
4606 Bunker Dr
Sebring, FL 33872