

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90185 037 ***150.00

DOCUMENT # 228282

1. Entity Name

WALDEN-SPARKMAN INC



Principal Place of Business

3120 SOUTH DOVER ROAD
PO BOX 10
DOVER FL 33527-7010

Mailing Address

3120 SOUTH DOVER ROAD
PO BOX 10
DOVER FL 33257-0010
US

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

59-0876858

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

90028563



6. Name and Address of Current Registered Agent

ENGLISH, RODNEY L.
14029 GAVIN RD
DOVER FL 33527

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VD
NAME LOMBARDI, THEODORE
STREET ADDRESS 5106 ROLLING FAIRWAY DR.
CITY-ST-ZIP VALRICO FL ☐ Delete

TITLE CD
NAME LOMBARDI, THEODORE
STREET ADDRESS 5106 ROLLING FAIRWAY DR.
CITY-ST-ZIP VALRICO FL ☒ Change ☐ Addition

TITLE CD
NAME ENGLISH, LEROY
STREET ADDRESS 16706 GAVIN RD.
CITY-ST-ZIP DOVER FL ☐ Delete

TITLE VED
NAME ENGLISH, LEORY
STREET ADDRESS 16706 GAVIN RD.
CITY-ST-ZIP DOVER FL ☒ Change ☐ Addition

TITLE TD
NAME HUTTO, PATRICIA J
STREET ADDRESS 4109 TANNER RD.
CITY-ST-ZIP DOVER FL ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE PD
NAME ENGLISH, RODNEY L
STREET ADDRESS GAVIN ROAD
CITY-ST-ZIP DOVER FL ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE S
NAME HUTTO, PATRICIA J.
STREET ADDRESS 4109 TANNER RD.
CITY-ST-ZIP DOVER FL ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE VD
NAME LOMBARDI, RENATO X
STREET ADDRESS 2240 NE 41ST ST.
CITY-ST-ZIP LIGHTHOUSE PT FL ☐ Delete

TITLE ☐ 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 607, 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:

Patricia J. Hutto PATRICIA J. HUTTO 2-13-03 813-659-1704
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)