

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 252906

1. Entity Name
SUN DANCE FARMS, INC.

FILED
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90032 027 ***150.00

Principal Place of Business Mailing Address
205 S.E. 3RD AVENUE SUITE #C 205 S.E. 3RD AVENUE SUITE #C
P.O. BOX 70 P.O. BOX 70
SOUTH BAY FL 33493-7070 SOUTH BAY FL 33493-7070

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 59-1027549 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LEE, DOUGLAS W
205 SE 3RD AVE
SOUTH BAY FL 33493

7. Name and Address of New Registered Agent

Name ROGERS, SAMUEL J.
Street Address (P.O. Box Number is Not Acceptable) 109 PACER CIRCLE
City WELLINGTON FL Zip Code 33414

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  PRESIDENT MARCH 8, 2001
(NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete
NAME ROGERS, SAMUEL J.
STREET ADDRESS 205 SE 3RD AVE
CITY-ST-ZIP SOUTH BAY FL

TITLE STD ☒ Delete
NAME LEE, DOUGLAS W LEE
STREET ADDRESS 205 SE 3RD AVE
CITY-ST-ZIP SOUTH BAY FL

TITLE PD ☐ Delete
NAME ROGERS, LAURA J
STREET ADDRESS 205 SE 3RD AVE
CITY-ST-ZIP SOUTH BAY FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME ROGERS, SAMUEL J.
STREET ADDRESS 109 PACER CIRCLE
CITY-ST-ZIP WELLINGTON, FL 33414

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

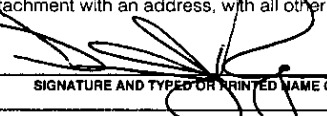
TITLE STD ☒ Change ☐ Addition
NAME ROGERS, LAURA J.
STREET ADDRESS 18896 POINT DRIVE
CITY-ST-ZIP TEQUESTA, FL 33469

TITLE VD ☐ Change ☒ Addition
NAME ROGERS, JOHN L.
STREET ADDRESS 1576 SEMINOLE ROAD
CITY-ST-ZIP BABSON PARK, FL 33827

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  SAMUEL J. ROGERS, PRESIDENT 561-996-3051
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)