

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90173 001 ***150.00

0076590

DOCUMENT # 383104

1. Entity Name

ST. CLOUD MINING COMPANY

Principal Place of Business

**100 RIALTO PLACE, STE 500
MELBOURNE FL 32901**

Mailing Address

**100 RIALTO PLACE, STE 500
MELBOURNE FL 32901**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1370776**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SOTTILE, JOHN H.
100 RIALTO PLACE, STE 500
MELBOURNE FL 32901**

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's 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	P	<input type="checkbox"/> Delete
NAME	FREEMAN, PATRICK S	
STREET ADDRESS	1243 MARIE ST	
CITY-ST-ZIP	TRUTH OR CONSEQ NM	
TITLE	TAS	<input type="checkbox"/> Delete
NAME	WHERRY, STEPHEN R.	
STREET ADDRESS	3916 PEACOCK DR.	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SEVERS, DWIGHT W	
STREET ADDRESS	770 NO. CARPENTER RD.	
CITY-ST-ZIP	TITUSVILLE FL 32796	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WHITE, JOHN L	
STREET ADDRESS	700 POPLAR	
CITY-ST-ZIP	TRUTH OR CONSEQ NM	
TITLE	DC	<input type="checkbox"/> Delete
NAME	SOTTILE, JOHN H.	
STREET ADDRESS	2324 BROOKSIDE WAY	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	FAZZINI, JOHN P	
STREET ADDRESS	101 E. STUART AVE.	
CITY-ST-ZIP	LAKE WALES FL 33853	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STRANGE, PATRICIA A	
STREET ADDRESS	100 RIALTO PLACE STE. 500	
CITY-ST-ZIP	MELBOURNE, FL 32901	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

By: **St. Cloud Mining Company**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01

Date

(321) 724-1700

Daytime Phone #

CR2E034 (10/00)