

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 am
Secretary of State

01-17-2002 90045 042 ***158.75

DOCUMENT # 408368

1. Entity Name

SHEPPARD ELECTRIC COMPANY

Principal Place of Business

9025 BOBBY CREEK RD.
 SUITE 14
 ORLANDO FL 32824

Mailing Address

9025 BOBBY CREEK RD.
 SUITE 14
 ORLANDO FL 32824

2. Principal Place of Business

9025 Bobby Creek Rd

Suite, Apt. #, etc.

#14

City & State

3. Mailing Address

9025 BOGGY CREEK RD

Suite, Apt. #, etc.

#14

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1443931

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SHEPPARD, DAVID B
 508 GOLFPARK DR
 CELEBRATION FL 34747

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

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, 2002 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 PD ☐ Delete
 NAME SHEPPARD, DAVID
 STREET ADDRESS 508 GOLFPARK DR
 CITY-ST-ZIP CELEBRATION FL 34747

TITLE SD ☐ Delete
 NAME SHEPPARD, SUSAN
 STREET ADDRESS 508 GOLFPARK DR
 CITY-ST-ZIP CELEBRATION FL 34747

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
 NAME
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUSAN

SHEPPARD

1-8-2002

407/857-4246

Date

Daytime Phone #

CR2E034 (9/01)

Attachment
907158
#488368

1-8-2001
Please note I
made a correction
on our address
in 2001, but it
was never
changed.

The road is
Boggy not Bobby.
Please change marks