

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2003 8:00 am
Secretary of State

DOCUMENT # 415426

1. Entity Name
POTTER ENTERPRISES, INC.



03-12-2003 90365 001 *****8.75
03-12-2003 90365 002 ***150.00

Principal Place of Business
**8437 SW 18 AVE
STUART FL 34997
US**

Mailing Address
**8437 SW 18 AVENUE
STUART FL 34997
US**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

4. FEI Number **59-1453451** Applied For
Not Applicable

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

Zip Country Zip Country

6. Name and Address of Current Registered Agent

**STEINBERG, MARK S
9719 S. DIXIE HWY
STE 17
PINECREST FL 33156**

7. Name and Address of New Registered Agent

Name **STEINBERG, MARK S.**
Street Address (P.O. Box Number is Not Acceptable)
9360 SUNSET DRIVE, SUITE 287
City **MIAMI, FL.** Zip Code **33173**

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

TITLE **PD** ☐ Delete
NAME **POTTER, ORRIN T.**
STREET ADDRESS **8437 SW 18TH AVE**
CITY-ST-ZIP **STUART FL 34997**

TITLE **SD** ☐ Delete
NAME **POTTER, CLARENCE E.**
STREET ADDRESS **17100 SW 184TH ST**
CITY-ST-ZIP **MIAMI FL 33187**

TITLE **VT** ☐ Delete
NAME **POTTER, CLARENCE E.**
STREET ADDRESS **17100 SW 184TH ST**
CITY-ST-ZIP **MIAMI FL 33187**

TITLE **D** ☐ Delete
NAME **POTTER, CHARLES E.**
STREET ADDRESS **5280 NW SHASTA PL**
CITY-ST-ZIP **CORVALLIS OR 97330**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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

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NAME
STREET ADDRESS
CITY-ST-ZIP

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: ORRIN T. POTTER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-03 (706) 745-6694
Date Daytime Phone #

CR2E034 (10/02)