

2002 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 JUN 13 AM 10:58

DOCUMENT # 677441

1. Entity Name *Sadler Crooked Lake Shore Inc*

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5112 ILE DE FRANCE

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Tallahassee Fla

City & State
Same

Zip
32308

Country
Leon

Zip
Same

Country

4. FEI Number
59-2149970

Applied For
Not Applicable

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

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name *GEORGE D. TEEI*

Street Address (P.O. Box Number is Not Acceptable)
5112 ILE DE FRANCE

City *Tallahassee*

FL

Zip Code
32308

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)

6/13/02

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
*DP
Susan M. TEEI
5112 ILE DE FRANCE
Tallahassee Fla 32308*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*600006109506--7
-06/28/02--01067--012
****150.00 ****150.00*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*DUP
GEORGE D. TEEI
5112 ILE DE FRANCE
Tallahassee Fla 32308*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*DST
SHANA M.A. TEEI
5112 ILE DE FRANCE
Tallahassee Fla 32308*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

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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 on an attachment with an address with all other like empowered.

SIGNATURE

George D. Teei

GEORGE D. TEEI

6/13/02 850-877-0330

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034B (12/01)