## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # 710669 Apr 10, 2000 8:00 am Secretary of State 1. Entity Name SIGMA NU HOLDING CORPORATION, INC. 04-10-2000 90048 033 \*\*\*\*70.00 Principal Place of Business Mailing Address 421 N WOODLAND BLVD UNIT 8242 421 N WOODLAND BLVD UNIT B242 DELAND FL 32720 DELAND FL 32720-3760 DOCOTODO 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 54-0628798 Not Applicable Country \$8.75 Additional Zip $Z_{iD}$ Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BROWN, HENRY KENNON 4547 BASS PLACE SOUTH JACKSONVILLE FL 32210 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. D Addition TITLE Change TITLE ■ Delete Jason Flesta Drive NAME NAME HILL, BRIAN STREET ADDRESS STREET ADDRESS 795 N. SPRING GARDEN AVE CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32720 ☐ Change Addition TITLE n TITLE Delete HALE, BURLEIGH NAME NAME STREET ADDRESS STREET ADDRESS 237 W. PLYMOUTH CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32720 ☐ Change 🗷 Addition TITLE X Delete Michael Portney NAME NAME FRIES, VINCENT 250 E. Stetsmare STREET ADDRESS STREET ADDRESS 10623 3RD STREET N., APT B Deland, FL 32720 CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33716 ☐ Addition T)TLE ☐ Delete TITLE minimizeros Henry Brown. 5616 Baxter Lake Drive NAME NAME Brown, Henry STREET ADDRESS STREET ADDRESS 4547 BASS PLACE SOUTH Jacksonville, FL 322ED CITY-ST-ZIP CITY-ST-ZIP JAX FL 32210. 1 TITLE ☐ Delete TITLE Change Addition Christopher Girata 250 Estetson Ave NAME NAME STREET ADDRESS STREET ADDRESS DelandiFL 32720 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Defete TITLE Erik Earp NAME NAME 260E, Eletson Ave STREET ADDRESS STREET ADDRESS Delandiff-32720 CITY-ST-ZIP CITY-ST-ZIP 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with a purpowered.

ATURE AND TYPEDOR BRINTED NAME OF SIGNAGO OFFICER OR DIRECTOR

Date

Dat

SIGNATURE:

MICHAELT PORTNOY