

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 19, 2002 8:00 am
Secretary of State

09-19-2002 90160 037 ****70.00

DOCUMENT # 714514

1. Entity Name

SUCCESS TODAY INTERNATIONAL, INC.

Principal Place of Business

9616 MCNORTON DR
 ALTAMONTE SPRINGS FL 32714
 US

Mailing Address

P.O. BOX 570460
 ORLANDO FL 32857-0460

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1286571

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EAGLE, RYAN
5827 SAGE DRIVE
ORLANDO FL 32807

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. 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

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DS
LAUGHLIN, TERENCE
9616 MCNORTON DR.
ALTAMONTE SPRINGS FL 32714

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
RYAN EAGLE
5827 SAGE DR.
ORLANDO FL 32807

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DT
EAGLE, SANDY
5827 SAGE DR
ORLANDO FL 32807

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
DENNIS LOCKWOOD
9616 MCNORTON DR.
ALT SPRINGS FLA 32714

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DP
YORK, BRIAN J
6381 CASCADE DR
KEYSTONE HTS FL 32656

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
BARBARA LOCKWOOD
9616 MCNORTON DR.
ALT SPRINGS FL 32714

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
PFAENDER, RICHARD E JR
25419 LUKE ST
CHRISTMAS FL 32709

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
PERCY, TAMARA L
1100 PALMA DR
ORLANDO FL 32805

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DV
WOOTEN, RICHARD T
1100 PALMA DR
ORLANDO FL 32805

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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 617, 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:

SIGNATURE REQUIRED

TERENCE LAUGHLIN

9/13/2002 3021209

CR2E037 (4/02)