

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 90728 018 ****61.25

DOCUMENT # 725671
 1. Entity Name
SHEOAH HIGHLANDS, INC.

Principal Place of Business Mailing Address
50-35 SHEOAH BLVD. **50-35 SHEOAH BLVD.**
WINTER SPRINGS FL 32708 **WINTER SPRINGS FL 32708**



DO NOT WRITE IN THIS SPACE

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 Applied For
59-1900323 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
SHEOAH HIGHLANDS, INC, SEC I
50-35 SHEOAH BLVD.
WINTER SPRINGS FL 32708

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TIFFANY, SHIRLEY 50-33 SHEOAH BLVD. WINTER SPRINGS, FL 00000 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RHYDDERCH, LEE 40-29 SHEOAH BLVD WINTER SPRINGS FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SELBY, GEORGIA 6038 SHEOAH BLVD WINTER SPRINGS FL 32708 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WALTON, PANSY 70-43 SHEOAH BLVD. WINTER SPRINGS FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MATTAI, THERESA 40-25 SHEOAH BLVD WINTER SPRINGS FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT/DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition GEORGIA CARRATHERS 60-38 SHEOAH BLVD. WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MELISSA TIFFANY 40-31 SHEOAH BLVD WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT/DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JIM SIEMSEM 40-28 SHEOAH BLVD WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *S. Georgia Carrathers*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)