

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90513 001 ***350.00

DOCUMENT # F01000002372



1. Entity Name
STSN GENERAL HOLDINGS, INC.

Principal Place of Business
**7090 SOUTH UNION PARK AVE. #200
MIDVALE UT 84047**

Mailing Address
**7090 SOUTH UNION PARK AVE. #200
MIDVALE UT 84047**

33005170



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number **87-0665253**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **WEST, WILLIAM**
STREET ADDRESS **7090 SOUTH UNION PARK AVE. #200**
CITY-ST-ZIP **MIDVALE UT 84047**

TITLE **Director** ☒ Change ☐ Addition
NAME **William West**
STREET ADDRESS **7090 S. Union Park Ave #200**
CITY-ST-ZIP **Midvale, UT 84047**

TITLE **V** ☐ Delete
NAME **PETERSON, DAVID**
STREET ADDRESS **7090 SOUTH UNION PARK AVE. #200**
CITY-ST-ZIP **MIDVALE UT 84047**

TITLE **President** ☐ Change ☒ Addition
NAME **David Garrison**
STREET ADDRESS **7090 S. Union Park Ave #200**
CITY-ST-ZIP **Midvale, UT 84047**

TITLE **S** ☐ Delete
NAME **VINCENT, JEFF**
STREET ADDRESS **7090 SOUTH UNION PARK AVE. #200**
CITY-ST-ZIP **MIDVALE UT 84047**

TITLE **Treasurer** ☒ Change ☐ Addition
NAME **David Peterson**
STREET ADDRESS **7090 S. Union Park Ave. #200**
CITY-ST-ZIP **Midvale, UT 84047**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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: **SIGNATURE OF JEFF VINCENT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-06-03 (501) 709-2000
Date Daytime Phone #

CR2E034 (10/02)