

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90035 021 ***150.00

DOCUMENT # F93000001034

1. Entity Name

TARPON TOWER, INC.

Principal Place of Business

P.O. BOX 58717
 SALT LAKE CITY UT 84158-0717

Mailing Address

P.O. BOX 58717
 SALT LAKE CITY UT 84158-0717

2. Principal Place of Business

255 S. Orange Ave.
 Suite, Apt. #, etc.
#1255

3. Mailing Address

255 S. Orange Ave.
 Suite, Apt. #, etc.
#1255

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32801

Country

USA

Zip

32801

Country

USA

4. FEI Number

87-0494366

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BEVERLEY, WILLIAM A
255 S. ORANGE AVENUE
SUITE 1255
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name **MARY B. SHARP**
 Street Address (P.O. Box Number is Not Acceptable)
255 S. Orange Avenue
#1255
 City **Orlando** FL **32801**

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

Mary B. Sharp **MARY B. SHARP**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

2-19-01

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 **PD** ☒ Delete
 NAME **PETERSON, MARILYN H**
 STREET ADDRESS **3069 E CARRIGAN CANYON DR**
 CITY-ST-ZIP **SALT LAKE CITY UT 84109**

TITLE **STD** ☒ Delete
 NAME **TOBLER, JENNIFER**
 STREET ADDRESS **3069 E CARRIGAN CANYON DR**
 CITY-ST-ZIP **SALT LAKE CITY UT 84109**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☒ Addition
 NAME **Mary B. Sharp**
 STREET ADDRESS **255 S. Orange Ave #1255**
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE **Secretary/Treasurer** ☐ Change ☒ Addition
 NAME **Michelle H. Brown**
 STREET ADDRESS **255 S. Orange Ave #1255**
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE **Finley, M. Hamilton** ☐ Change ☒ Addition
 NAME **255 S. Orange Ave #1255**
 STREET ADDRESS **Orlando, FL 32801**
 CITY-ST-ZIP **N.P.**

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

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Mary B. Sharp **MARY B. SHARP**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407-836-0016
3/13/01

CR2E034 (10/00)