

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F98000003647**

1. Entity Name

S.I. GOLDMAN COMPANY, INC.**FILED****Mar 27, 2001 8:00 am**
Secretary of State

03-27-2001 90037 045 ***150.00

733656

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

**799 BENNETT DR
LONGWOOD FL 32750****799 BENNETT DR
LONGWOOD FL 32750**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **74-2880219**

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	CDV			<input type="checkbox"/> Delete					<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	BEITTENMILLER, J. GORDON	THREE RIVERWAY, SUITE 200	HOUSTON TX 77056			BEITTENMILLER, J. GORDON	777 POST OAK BLVD. SUITE 500	HOUSTON TX 77056	
	S			<input type="checkbox"/> Delete		S			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	GEORGE, WILLIAM	THREE RIVERWAY, SUITE 200	HOUSTON TX 77056			GEORGE, WILLIAM	777 POST OAK BLVD, SUITE 500	HOUSTON TX 77056	
	P			<input checked="" type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	BURKETT, RONALD J	799 BENNETT DR	LONGWOOD FL 32750						
	S			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	GRAMMER, JENNIFER A	799 BENNETT DR	LONGWOOD FL 32750						
				<input type="checkbox"/> Delete		PRESIDENT			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
						MARTIN, JOHN C.	799 BENNETT DRIVE	LONGWOOD, FL 32750	
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)