

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G51783

1. Entity Name

SUNSHINE PEAT, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90080 033 ***150.00

Principal Place of Business

Mailing Address

8008 APOPKA BLVD
APOPKA FL 32703
US

P.O. BOX 547008
ORLANDO FL 32854-7008
US

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 59-2311599

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

FLETCHER, RICHARD L., JR.
8008 APOPKA BLVD
ORLANDO FL 32854-7008

Name Richard L. Fletcher, Jr.
Street Address (P.O. Box Number is Not Acceptable) 1205 Belleaire Cir.
City Orlando FL Zip Code 32804

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, 2000 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 D
NAME ST JAMES, WILLIAM G.
STREET ADDRESS 8008 APOPKA BLVD.
CITY-ST-ZIP APOPKA FL

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

TITLE PVD
NAME FLETCHER, RICHARD L, JR
STREET ADDRESS 8008 APOPKA BLVD.
CITY-ST-ZIP APOPKA FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE Secretary/Treasurer
NAME Dom Riccio
STREET ADDRESS 8008 APOPKA BLVD
CITY-ST-ZIP APOPKA FL 32703 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

Richard L. Fletcher, Jr. 4/19/00

Date

Daytime Phone #

CR2E034 (9/99)