2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

H13912 **DOCUMENT #**

1. Entity Name

P. O. BOX 1436

LABELLE FL 33935

Principal Place of Business

C/O DANIEL E. SUTHERLAND

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

SUTHERLAND DRAINAGE SYSTEMS, INC.

Country



Mailing Address C/O DANIEL E. SUTHERLAND

P. O. BOX 1436

LABELLE FL 33935

3. Mailing Address Suite, Apt. #, etc. City & State

Apr 24, 2003 8:00 am 5 Secretary of State



☐ CHECK HERE IF MAKING CHANGES					
4. FEI Number 59-2432381	Applie	ed For			
39-2432301	Not A	pplicabl			
5. Certificate of Status Desired	□ \$8.75 Additio	nal			

6	. Name and Address of Current R	egistered Agent		7. Name	and Address of N	New Registered Age	nt
	The second second		_Name				
SUTHERLAND,			Ĺ		_		

Country

4560 ESTERO BLVD **APT 303**

FORT MYERS BEACH FL 33931

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Street	Address (P.O.	Box Number is	Not Acceptable)
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city ehigh	Acres	 	FL	Zip Code 3397

9. Election Campaign Financing

Trust Fund Contribution.

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. & FILE NOW!!! FEE IS \$150.00

(NOTE: Registered Agent signature required when reinstating)

\$5.00 May Be Added to Fees

Fee Required

After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State .10

				<u></u>			
.10.	OFFICERS AND DIRECTOR	RS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP.	DPST SUTHERLAND, DANIEL E. 4560 ESTERO BLVD., APT 303 FORT MYERS BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2501 19th Street S.W. Lehigh Acres, FL 33971	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	'	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
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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

SIGNATURE