

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 25, 2000 8:00 am**  
**Secretary of State**

08-25-2000 90059 001 \*2,200.00

DOCUMENT # J04607

1. Entity Name  
**SUPERIOR ASSETS III, INC.** ✓

Principal Place of Business  
1788 Hubbard Ave.  
Salt Lake City UT 84108 US

Mailing Address  
P.O. Box 58717  
Salt Lake City UT 84158-0717

2. Principal Place of Business  
255 S. Orange Avenue  
Suite, Apt. #, etc.

3. Mailing Address  
255 S. Orange Avenue  
Suite, Apt. #, etc.  
Suite 1255

DO NOT WRITE IN THIS SPACE

Suite 1255  
City & State  
Orlando, FL  
Zip  
32801

City & State  
Orlando, FL

4. FEI Number  
59-2650395

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Heintzelman, Virginia H  
2655 Lake Shore Drive  
Suite 504  
Orlando, FL 32803

7. Name and Address of New Registered Agent

Name  
**William A. Beverley**  
Street Address (P.O. Box Number is Not Acceptable)  
**255 South Orange Avenue**  
**Suite 1255**  
City  
**Orlando** **FL** Zip Code  
**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   
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

8-21-00

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	Peterson, Marilyn H	
STREET ADDRESS	3069 E. Carrigan Canyon Dr.	
CITY-ST-ZIP	Salt Lake City UH	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	Tobler, Jennifer	
STREET ADDRESS	3069 E. Carrigan Canyon Dr.	
CITY-ST-ZIP	Salt Lake City UH	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Finley M. Hamilton	
STREET ADDRESS	255 S. Orange Avenue, Suite 1255	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William A. Beverley	
STREET ADDRESS	255 S. Orange Avenue, Suite 1255	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michelle Brown	
STREET ADDRESS	255 S. Orange Avenue, Suite 1255	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jane Linton	
STREET ADDRESS	255 S. Orange Avenue, Suite 1255	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joyce Ivanovich	
STREET ADDRESS	255 S. Orange Avenue, Suite 1255	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Marilyn H. Peterson	
STREET ADDRESS	3069 E. Carrigan Canyon Dr.	
CITY-ST-ZIP	Salt Lake City UT	

CR2E034 (9/99)

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

8-21-00 (407) 835-0016

Date

Daytime Phone #

Doc #1's L 37445 / 19970  
AKERMAN SENTERFITT #90077 / 19971  
#98144 / 19972  
J04607 / 19973

ATTORNEYS AT LAW

CITRUS CENTER

255 SOUTH ORANGE AVENUE

POST OFFICE BOX 231

ORLANDO, FLORIDA 32802-0231

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<http://www.akerman.com>

August 22, 2000

**FEDERAL EXPRESS**

Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

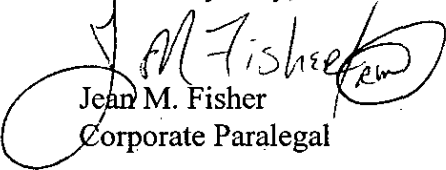
Re: Uniform Business Report: Hamilton Farms, Inc.; Superior Assets I, Inc.;  
Superior Assets II, Inc.; Superior Assets III, Inc.

Dear Sir or Madam:

Enclosed are the Uniform Business Reports for each of the above-referenced corporations which were previously dissolved and reinstated through revocations of dissolution. A check in the total amount of \$2,200.00 is enclosed to cover the \$550.00 filing fee for each corporation.

Your immediate attention to the filing of the Uniform Business Reports will be appreciated. Please call me if you have any questions.

Yours very truly,

  
Jean M. Fisher  
Corporate Paralegal

/jmf

Enclosures

cc: William A. Beverley (w/o encl.)  
Charles T. Brumback, Jr., Esq. (w/o encl.)