

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 19, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # J59561**1. Entity Name  
SIGNATURE DESIGN & DEVELOPMENT, INC.Principal Place of Business  
4142 ESCONDITO CIR  
SARASOTA FL 34238  
Mailing Address  
P.O. BOX 943  
OSPREY FL 342290943  
US2. Principal Place of Business  
2747 ORCHID OAKS DRIVE

3. Mailing Address

Suite, Apt. #, etc.  
102A

Suite, Apt. #, etc.

City & State  
SARASOTA FL

City &amp; State

Zip Country  
34239 US

Zip Country

4. FEI Number  
**65-0057810**  
Applied For  
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**LATTMANN, STEPHEN E.  
4142 ESCONDITO CIRCLESARASOTA FL  
34238**7. Name and Address of New Registered Agent**Name  
LATTMANN STEPHEN EMR.Street Address (P.O. Box Number is Not Acceptable)  
2747 ORCHID OAKS DRIVE

102A

City Zip Code  
SARASOTA FL 34239

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 **STEPHEN E. LATTMANN****04/19/2001**

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**TITLE DST ☐ Delete  
NAME CRAMER, LAWRENCE D.  
STREET ADDRESS 4142 ESCONDITO CIRCLE  
CITY-ST-ZIP SARASOTA FLTITLE DP ☐ Delete  
NAME LATTMANN, STEPHEN E.  
STREET ADDRESS 4142 ESCONDITO CIRCLE  
CITY-ST-ZIP SARASOTA FLTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE DST ☒ Change ☐ Addition  
NAME CRAMER LAWRENCE DMR.  
STREET ADDRESS 2747 ORCHID OAKS DRIVE - 102A  
CITY-ST-ZIP SARASOTA FL 34239TITLE DP ☒ Change ☐ Addition  
NAME LATTMANN, STEPHEN E.  
STREET ADDRESS 2747 ORCHID OAKS DR.  
CITY-ST-ZIP SARASOTA FL 34239TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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: STEPHEN E. LATTMANN**

MR.

04/19/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)