

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2000 8:00 am
Secretary of State
 04-25-2000 90086 012 ***150.00

DOCUMENT # J88115

1. Entity Name

STANSON'S MANAGEMENT, INC.

Principal Place of Business

3667 SE DOUBLETON DR
 STUART FL 34997
 US

Mailing Address

3667 SE DOUBLETON DR
 STUART FL 34997-5621
 US

2. Principal Place of Business

1621 Via Tuscanwy
 Suite, Apt. #, etc.

3. Mailing Address

1621 Via Tuscanwy
 Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

Winter Park, FL

4. FEI Number

59-2841812

Applied For

Not Applicable

Zip

Country

32789

Zip

Country

32789

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAZARUS, STANLEY
 3667 SE DOUBLETON DR
 STUART FL 34997

7. Name and Address of New Registered Agent

Name

William Dingman

Street Address (P.O. Box Number is Not Acceptable)

1621 Via Tuscanwy

City

Winter Park

FL

Zip Code

32789

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)

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	DP	<input checked="" type="checkbox"/> Delete
NAME	LAZARUS, STANLEY	
STREET ADDRESS	3667 SE DOUBLETON DR	
CITY-ST-ZIP	STUART FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LAZARUS, SALLY	
STREET ADDRESS	3667 SE DOUBLETON DR	
CITY-ST-ZIP	STUART FL	
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	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William Dingman	
STREET ADDRESS	1621 Via Tuscanwy	
CITY-ST-ZIP	Winter Park, FL 32789	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)