

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # L32433**

1. Entity Name

**SOUTH LAKELAND INDUSTRIAL PARK, INC.**

Principal Place of Business

**C/O STEVEN T. MOORE  
455 COMMERCE DRIVE - P.O. BOX 6558  
LAKELAND FL 33807-6558**

Mailing Address

**C/O STEVEN T. MOORE  
455 COMMERCE DRIVE - P.O. BOX 6558  
LAKELAND FL 33807-6558**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-2981470**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**STEVEN T. MOORE  
1010 S. BROADWAY ST.  
BARTOW FL 33830**

7. Name and Address of New Registered Agent

**Name STEVEN T. MOORE  
Street Address (P.O. Box Number is Not Acceptable)  
117 E. MAXWELL ST.  
City LAKELAND, FL Zip Code 33803**

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)

1-6-02

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, 2002 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

**P** ☐ Delete  
**MOORE, STEVEN T.  
1010 S BROADWAY ST  
BARTOW FL****D** ☐ Delete  
**GARD, DIANE MOORE  
2023 COUNT COURT  
LAKELAND FL**☐ Delete  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Delete  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Delete  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Delete  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

**P** ☒ Change ☐ Addition  
**MOORE, STEVEN T.  
117 E. MAXWELL ST.  
LAKELAND, FL 33803**☐ Change ☐ Addition  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ Addition  
TITLE  
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CITY-ST-ZIP☐ Change ☐ Addition  
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CITY-ST-ZIP☐ Change ☐ Addition  
TITLE  
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

1-6-02

Date

863 967 1131

Daytime Phone #

**FILED**  
**Jan 14, 2002 8:00 am**  
**Secretary of State**

01-14-2002 90066 031 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE

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