

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M76434

1. Entity Name

SUNDANCE GROVES, INC.

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90012 003 ***150.00

Principal Place of Business

505 66TH AVE. S.W. (32962)
P.O. BOX 2488
VERO BEACH FL 32961

Mailing Address

505 66TH AVE. S.W. (32962)
P.O. BOX 2488
VERO BEACH FL 32961

2. Principal Place of Business

505 66TH AVE S.W. (32962)

Suite, Apt. #, etc.
P.O. BOX 2090

3. Mailing Address

P.O. BOX 2090

Suite, Apt. #, etc.

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

Zip

32961

Country

USA

Zip

32961

Country

USA

4. FEI Number

65-0055248

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAMBETH, SCOTT
1405 46TH AVE
VERO BEACH FL 32966

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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)

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 P
NAME LAMBETH, SCOTT
STREET ADDRESS 1405 46TH AVE
CITY-ST-ZIP VERO BEACH FL ☐ Delete

TITLE T
NAME MILWOOD, DAVID
STREET ADDRESS 4920 13TH LN
CITY-ST-ZIP VERO BEACH FL ☐ Delete

TITLE VP
NAME POWELL, RON
STREET ADDRESS 1223 36TH AVENUE S.W.
CITY-ST-ZIP VERO BEACH FL ☐ Delete

TITLE S
NAME JENKINS, JUDY
STREET ADDRESS 7304 CABANA LANE
CITY-ST-ZIP FT. PIERCE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME POWELL, RON
STREET ADDRESS 1572 53RD AVENUE
CITY-ST-ZIP VERO BEACH, FL ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 #

3/6/01 561-562-4502

CR2E034 (10/00)