

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

5/5

FILED
Jun 27, 2003 8:00 am
Secretary of State

05-05-2003 91760 025 ****70.00

DOCUMENT # N01000008651

1. Entity Name

SARASOTA PREDATORS INC.



Principal Place of Business

**4302 MEADOWLAND CIRCLE
SARASOTA FL 34233**

Mailing Address

**4302 MEADOWLAND CIRCLE
SARASOTA FL 34233**

55050007

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

30-0021101

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SPRAGUE, BARBARA
1710 NELDA LANE
SARASOTA FL 34232**

7. Name and Address of New Registered Agent

Name **DAVID R. HARTMAN**

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

4302 MEADOWLAND CIRCLE

City **SARASOTA**

FL

Zip Code **34233**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

DAVID R HARTMAN

Signature, typed or printed name of registered agent and title if applicable.

David R Hartman

(NOTE: Registered Agent signature required when reinstating)

4-30-03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D (PRESIDENT)** ☐ Delete
NAME **HARTMAN, DAVID**
STREET ADDRESS **4302 MEADOWLAND CIRCLE**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE **D** ☒ Delete
NAME **SPRAGUE, CECIL**
STREET ADDRESS **1710 NELDA LANE**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☒ Delete
NAME **WILLIAMS, TODD**
STREET ADDRESS **4939 LIVE OAK DR**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **D** ☐ Change ☒ Addition
NAME **LAMBERT, JOSEPH**
STREET ADDRESS **4550 47TH ST W, APT #805**
CITY-ST-ZIP **BRADENTON, FL 34210**

TITLE **D** ☐ Change ☒ Addition
NAME **PITTMAN, THOMAS**
STREET ADDRESS **6134 TURNBURY PK, APT #7102**
CITY-ST-ZIP **SARASOTA, FL 34243**

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

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

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David R Hartman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-03

Date

941-923-7622

Daytime Phone #

CR2E037 (10/02)