

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2001 8:00 am
Secretary of State

07-12-2001 90112 018 ****61.25

001314

DOCUMENT # N45860

1. Entity Name

THE BUCKINGHAM COMMUNITY CEMETERY ASSOCIATION, I

Handwritten initials

Principal Place of Business

Mailing Address

**13910 ORANGE RIVER BLVD
FT MYERS FL 33905**

**13910 ORANGE RIVER BLVD
FT MYERS FL 33905**

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

65-0256913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SAPP, JACK
13910 ORANGE RIVER BLVD
FT MYERS FL 33905**

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

**FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P	SAPP, JACK	13910 ORANGE RIVER BLVD	FT MYERS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VP	MANN, TIMOTHY	5621 NEAL RD	FT MYERS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	SOLOMON, AUDREY	4601 BUDKINGHAM RD	FT MYERS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
T	SAPP, THELMA	13930 ORANGE RIVER BLVD	FT MYERS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
T	HIGGINBOTHAM	5561 NEAL RD	FT MYERS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
T	FLINT, BILLY	6630 W. WOODACRES RD.	FT MYERS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: *Handwritten signature of Jack Sapp*

Handwritten date and number: 7/9/01 941-344-2512

CR2E037 (5/01)