

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2002 8:00 am
Secretary of State

07-10-2002 90181 016 ***150.00

DOCUMENT # P00000015727

1. Entity Name
SUNSHINE TRAFFIC SALES INC.

Principal Place of Business
7061 OLD KINGS RD. SOUTH. #158
JACKSONVILLE FL 32217

Mailing Address
PO BOX 23548
JACKSONVILLE FL 32241



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
739 Wilson Road

3. Mailing Address
739 Wilson Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Winter Springs, FL

City & State
Winter Springs, FL

4. FEI Number
59-3634537

Applied For
 Not Applicable

Zip
32708

Country
USA

Zip
32708

Country
USA

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

6. Name and Address of Current Registered Agent

SHERMAN, PETE D
7061 OLD KINGS RD. SOUTH, #158
JACKSONVILLE FL 32217

7. Name and Address of New Registered Agent

Name
SAME
 Street Address (P.O. Box Number is Not Acceptable)
739 Wilson Road
 City **Winter Springs** **FL** Zip Code **32708**

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 _____
 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	P SHERMAN, PETER D JR 7061 OLD KINGS RD S JACKSONVILLE FL 32217	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHERMAN, ANN L 7061 OLD KINGS RD S JACKSONVILLE FL 32217	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Sherman, Peter D Jr. 739 Wilson Rd. Winter Springs FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Sherman Anne L 739 Wilson Rd. Winter Springs FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Peter D Sherman* **REQUIRED: SHERMAN**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 8, 2002 407-977-4667
 Date Daytime Phone #

CR2E034 (4/02)

Attachment
Doc. # 00000015727
120135



**SUNSHINE
TRAFFIC SALES, INC.**

Web site: www.sunshinetraffic.com

E-Mail: mail@sunshinetraffic.com

TRAFFIC COUNTING EQUIPMENT AND SUPPLIES
DISTANCE MEASURING EQUIPMENT AND SUPPLIES

739 WILSON ROAD
WINTER SPRINGS, FL 32708

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern,

I received the 2002 Uniform Business Report July 8, 2002 indicating I had not filed the application in time to file the normal \$150.00 dollar fee. I immediately called the Division of Corporations stating this was my first notice and they said, "pay the normal \$150.00 fee with a letter of explanation". Please accept this letter as my explanation for not paying the fee on time. Also, I have noted my records the date for this payment for future reference.

Sincerely,

Pete D Sherman
President