

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90109 031 ***150.00

DOCUMENT # P00000051497

1. Entity Name
SHADY OAKS OF LAKE CITY, INC.

Principal Place of Business

4400 US HWY.90 WEST
LAKE CITY FL 32055

Mailing Address

4400 US HWY.90 WEST
LAKE CITY FL 32055

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3671747

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

EAGLE, THOMAS H
4400 US HWY.90 WEST
LAKE CITY FL 32055

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. 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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
HITSON, SHIRLEY
2250 US HWY.90 WEST
LAKE CITY FL 32055

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

☐ Delete
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
EAGLE, THOMAS H
4400 US HWY.90 WEST
LAKE CITY FL 32055

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

☐ Delete
TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
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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**

9/16/02

Date

386-752 9626

Daytime Phone #

CR2E034 (4/02)

Attachment # P00000051497
Shady Oaks of Lake City, Inc. 125518



P.O. Box 813
Lake City, FL 32056
(904) 397-3880 (904) 961-1086
Fax: (904) 752-5263
6542

September 11, 2002

Re: Uniform Business Report Filings

Divisions of Corporations
Uniforms Business Reports Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Sir or Madame:

Per the conversation you had with Ms. Hitson on Monday, September 9, 2002, regarding, the first mailing of this form, Ms Hitson stated that she had not received it.

We are mailing the amount that Ms. Hitson was told to send. Enclosed please find a check in the amount of \$150.00 and the filing statement.

Thank you

Leannah Krauss,
Office Manager