

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000093628

1. Entity Name

SIGNATURE EQUITY GROUP, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 91112 033 ***150.00

Principal Place of Business

408 W. UNIVERSITY AVE., SUITE 406
GAINESVILLE FL 32601

Mailing Address

408 W. UNIVERSITY AVE., SUITE 406
GAINESVILLE FL 32601

2. Principal Place of Business

4609 B-3 N.W. 6TH ST

3. Mailing Address

4609 B-3 NW 6TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

GAINESVILLE, FL

City & State

GAINESVILLE, FL

4. FEI Number

59-3674453

Applied For

Not Applicable

Zip

Country

32609 U.S.

Zip

Country

32609 US

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

HOPE, A. BICE

408 W. UNIVERSITY AVE., SUITE 406
GAINESVILLE FL 32601

Name

LARRY CHESHIRE

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

4609 B-3 NW 6TH ST

City

GAINESVILLE

FL

Zip Code

32609

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

Larry H. Cheshire

LARRY H. CHESHIRE

April 23, 2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☒ Delete
NAME	HOPE, A. BICE	
STREET ADDRESS	408 W. UNIVERSITY AVE., SUITE 406	
CITY-ST-ZIP	GAINESVILLE FL 32601	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P, S, D	☒ Change ☐ Addition
NAME	LARRY H. CHESHIRE	
STREET ADDRESS	4609 B-3 NW 6TH ST	
CITY-ST-ZIP	GAINESVILLE, FL 32609	
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		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Larry H. Cheshire LARRY H. CHESHIRE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 23, 2001

Date

Daytime Phone #

352-375-2121

CR2E034 (10/00)