

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 18, 2002 8:00 am**  
**Secretary of State**

05-19-2002 90230 042 \*\*\*150.00

**DOCUMENT # P00000098859**

1. Entity Name  
**SOD RITE, INC.**

Principal Place of Business

**445 27TH AVENUE SW  
 SUITE A  
 VERO BEACH FL 32968**

Mailing Address

**445 27TH AVENUE SW  
 SUITE A  
 VERO BEACH FL 32968**

2. Principal Place of Business

3. Mailing Address

**177 43rd Avenue**

**177 43rd Avenue**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**VERO BEACH, FLORIDA**

City & State

**VERO BEACH, FL**

Zip

**32968**

Country

**IRIVER CO**

Zip

**32968**

Country

**INDIAN RIVER**

6. Name and Address of Current Registered Agent

**BASS, RICHARD  
 6704 BROOKLINE AVENUE  
 FT. PIERCE FL 34951**

7. Name and Address of New Registered Agent

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD CARROLL, JAMES E 1611 19TH STREET VERO BEACH FL 32962</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD VANDERPLOEG, DAWN 1611 19TH STREET VERO BEACH FL 32962</b> <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	<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
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:

**SIGNATURE**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

To Whom it May Concern-

7-11-02

Please make note that our  
current address is ~~Atchamnt~~ 97590  
#100000098859

177 43<sup>rd</sup> Avenue  
Vero Beach, Florida  
32968

Also we recieved another form (2002 Bus. Rep)  
when calling in they informed that  
the form sent in April did not  
have our FEI # so please make  
not 59-367 5546.

Thank you,

Theresa & Barkwee

SOD Rite, Inc

177 43<sup>rd</sup> Ave  
Vero Beach, FL 32968