

2001 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 20, 2001 8:00 am
Secretary of State

05-18-2001 91568 049 ***150.00

DOCUMENT # P00000113661

1. Entity Name

SAND MOUNTAIN APPRAISERS, INC.

(CR)

Principal Place of Business

26410 SUNDERLAND DR., UNIT 3102
 BONITA SPRINGS FL 34135

Mailing Address

26410 SUNDERLAND DR., UNIT 3102
 BONITA SPRINGS FL 34135

49287



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-1968316

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

KRAKOFF, WILLIAM P
26410 SUNDERLAND DR., UNIT 3102
BONITA SPRINGS FL 34135

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.

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 \$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

TITLE: **PRESIDENT** ☐ Delete
 NAME: **WILLIAM P. KRAKOFF**
 STREET ADDRESS: **26410 SUNDERLAND DR # 3102**
 CITY-ST-ZIP: **BONITA SPRINGS, FL 34135**

TITLE: **VICE PRESIDENT** ☐ Delete
 NAME: **CHAROL M. KRAKOFF**
 STREET ADDRESS: **26410 SUNDERLAND DR # 3102**
 CITY-ST-ZIP: **BONITA SPRINGS FL 34135**

TITLE: ☐ Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
☐ Delete

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 CITY-ST-ZIP:
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition

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

TITLE: ☐ Change ☐ Addition
 NAME:
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☐ Change ☐ Addition

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 CITY-ST-ZIP:
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this report 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

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

WILLIAM P. KRAKOFF
26410 Sunderland Drive
Unit 3102
Bonita Springs, FL 34135

#P00000113661
767302

May 8, 2001

Florida Department of State
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I am writing in regard to Document # P00000113661, The Uniform Business Report. Please accept my check in the amount of \$150.00 for my Filing Fees. I sincerely regret the tardiness of the filing and request that you waive any penalty I may have incurred. I am a new business here in Florida, and my old accountant in Georgia just returned all my paperwork to me, incomplete.

I would appreciate your consideration in this matter. Again, my sincere apologies, and I hope that you will accept my payment for my Uniform Business Report.

Sincerely,

William P. Krakoff
CEO

WPK/srh

Enclosure