

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90066 047 ***150.00

DOCUMENT # P00000116741**1. Entity Name**
BILL SANDIDGE, INC.**Principal Place of Business****3801 W. SUNRISE BLVD.**
FT. LAUDERDALE FL 33311**Mailing Address****3801 W. SUNRISE BLVD.**
FT. LAUDERDALE FL 33311**2. Principal Place of Business****1000 North Federal Highway**

Suite, Apt. #, etc.

3. Mailing Address**1000 North Federal Highway**

Suite, Apt. #, etc.

City & State**Pompano Beach, FL****City & State****Pompano Beach, FL 33062****4. FEI Number****65-1070417**

Applied For

Not Applicable

Zip**33062****Country****Zip****33062****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****HUMPHRIES, J. GREGORY ESQ**
300 S. ORANGE AVE., STE. 1000
ORLANDO FL 32801

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, 2002 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**
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
SANDIDGE, WILLIAM
3801 W. SUNRISE BLVD
FORT LAUDERDALE FL 33311 ☐ Delete**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1000 North Federal Highway
Pompano Beach, Florida 33062**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
DAYHOFF, MICHAEL R
3801 W. SUNRISE BLVD
FORT LAUDERDALE FL 33311 ☐ Delete**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1000 North Federal Highway
Pompano Beach, FL 33062**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
SMITH, PHILIP P
3801 W. SUNRISE BLVD
FORT LAUDERDALE FL 33311 ☐ Delete**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
DV
Smith, Philip P
1000 North Federal Highway
Pompano Beach, FL 33062**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete**TITLE**
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:***Michael R. Dayhoff***Michael R. Dayhoff, Director****954-867-1234**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)