

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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

04-17-2002 90161 041 ***150.00

DOCUMENT # PD10000003232 ✓

1. Entity Name

Rising Tide Consulting Inc.

831109

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3545-1 St. Johns Bluff Rd

Suite, Apt. #, etc.

Ste. 337

City & State

JACKSONVILLE, FL

Zip

32224

Country

DUVAL

3. Mailing Address

3545-1 St Johns Bluff Rd

Suite, Apt. #, etc.

Ste 337

City & State

Jacksonville, FL

Zip

32224

Country

DUVAL

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3688893

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Kerry Sutton

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

12843 MURFELD BLVD S

City

JACKSONVILLE

FL

Zip Code

32225

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

x Kerry Sutton

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

4/9/2002

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so. ☐

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	<u>PRESIDENT</u>
NAME	<u>KERRY SUTTON</u>
STREET ADDRESS	<u>12843 MURFELD BLVD S</u>
CITY, ST, ZIP	<u>JACKSONVILLE, FL 32225</u>
TITLE	<u>SECRETARY</u>
NAME	<u>DIANE K. SUTTON</u>
STREET ADDRESS	<u>12843 MURFELD BLVD S</u>
CITY, ST, ZIP	<u>JACKSONVILLE, FL 32225</u>
TITLE	<u>TREASURER</u>
NAME	<u>DIANE K SUTTON</u>
STREET ADDRESS	<u>12843 MURFELD BLVD S</u>
CITY, ST, ZIP	<u>JACKSONVILLE, FL 32225</u>
TITLE	
NAME	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

x Kerry Sutton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/9/2002

DATE

904-860-9700

DAYTIME PHONE #

CR2E034B (12/01)