


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

**FILED**  
**Aug 13, 2003 8:00 am**  
**Secretary of State**

08-13-2003 90076 015 \*\*\*150.00

DOCUMENT # <b>P01000012473</b>	
1. Entity Name <b>THE STAUFFER CORPORATION</b>	

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>1331 OSCEOLA DRIVE</b>	3. Mailing Address <b>1331 OSCEOLA DRIVE</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State <b>FT. MYERS, FL</b>	City & State <b>FT. MYERS, FL</b>	4. FEI Number <b>05-1082681</b>	Applied For Not Applicable
Zip <b>33901</b>	Country <b>USA</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name <b>MICHAEL STAUFFER</b>
Street Address (P.O. Box Number is Not Acceptable) <b>1331 OSCEOLA DRIVE</b>
City <b>FT. MYERS</b> FL Zip Code <b>33901</b>

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

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MICHAEL STAUFFER</b> <b>1331 OSCEOLA DRIVE</b> <b>FT. MYERS, FL 33901</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T/S</b> <b>MONICA SESTER</b> <b>2113 SW 31ST TERRACE</b> <b>CAPE CORAL, FL 33914</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

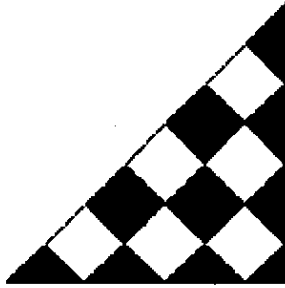
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8/8/2003** **239-936-3843**  
Date Daytime Phone #

CR2E034B (12/02)



Attachment#  
CHECKERED FLAG CONSTRUCTION  
1331 OSCEOLA DRIVE  
FORT MYERS, FL 33901  
MAIN 239-936-5843  
FAX 239-936-5853  
CHECKEREDFLAGCONSTRUCTION.COM

80138236  
PO16000012473

August 8, 2003

Uniform Business Report  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

Please find enclosed the Uniform Business Report form along with a check in the amount of \$150.00.

Our corporation did not receive the Uniform Business Report form in the mail due to an address change. Michael Stauffer, president, spoke with a representative with the Division of Corporations which informed him to write a letter stating the delay.

If there are any problems, please feel free to call me at the above listed number.

Sincerely,

*Monica J. Sester*

Monica Sester  
Secretary/Treasurer