

FILED

02 MAY 13 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000027961-
1. Entity Name

Suddeth Productions, INC.,

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5125 Castello Dr.
Suite, Apt. #, etc.

3. Mailing Address
5125 Castello Dr.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
NAPLES, FL.
Zip
34103
Country

City & State
NAPLES, FL.
Zip
34103
Country

4. EEI Number
54-1613760
Applied For
Not Applicable

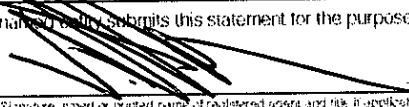
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
JOE MILLER
Street Address (P.O. Box Number is Not Acceptable)
5125 CASTELLO DR.
City
NAPLES FL 34103

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  DATE 3-15-02
(Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering))

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

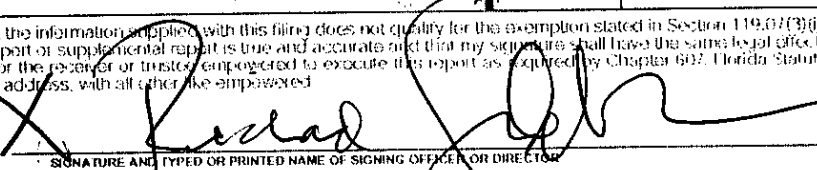
11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, VP, S, T RICHARD SUDDETH 5125 CASTELLO DR. NAPLES, FL 34103
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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)(b), 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: _____ Daytime Phone: _____

CR2E034B (12/01)