

02/2003

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAY 12 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000042089

1. Entity Name

Stirling Horse Center, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14490 Stirling Road

Suite, Apt. #, etc.

3. Mailing Address

14490 Stirling Road

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Fort Lauderdale, Fla.

City & State

Fort Lauderdale

4. FEI Number

65-1119375

Applied For

Not Applicable

Zip

33330

Country

USA

Zip

Fla

Country

33330 USA

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

7. Name and Address of Current Registered Agent

Name: Eileen Dunn

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

14490 Stirling Road

City: Ft. Lauderdale

FL

Zip Code

33330

DO NOT WRITE
IN THIS SPACE

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)

4/11/03
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
D	DUNN, ROBERT	14490 Stirling Road	Ft. Lauderdale, Fla. 33330

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	DUNN, Eileen	14490 Stirling Road	Ft. Lauderdale, Fla. 33330

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

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TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

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

4/11/03
Date

Daytime Phone #

CR2E034B (12/02)

5/20

May 9, 2003

Barbara Mitchell
Document Specialist
Revision of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re - Sterling Horse Center Inc
Ref # PO1000042089

This request is to waive the \$400.00 late fee. No forms
of any type were sent to Sterling Horse Center - 14490 Sterling
This Center is at the address for over 27 years. -
The attached U.S.R. is accompanied with this letter.

Please send whatever requirements to the address

Sterling Horse Center
14490 Sterling Road
Southwest Ranches, Florida
33330

A check for 2002-2003 years has been accepted. Please
send immediately whatever requirement or information
this business is important to us. -

Thank you

Eileen Hume

Please reply until correctly done. No documents have
ever been sent to this address.