

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90123 047 ***150.00

0131571 AV

DOCUMENT # P01000056446

1. Entity Name
SHARKEY, HATFIELD AND HALL, INC.



Principal Place of Business
1370 EDDY STREET
MERRITT ISLAND FL 32952
US

Mailing Address
1370 EDDY STREET
MERRITT ISLAND FL 32952
US

11030702



2. Principal Place of Business

1370 Eddy St
Suite, Apt. #, etc.

3. Mailing Address

1370 Eddy St
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Merritt IS FL

City & State
Merritt IS FL

4. FEI Number 59-3727361

Applied For
Not Applicable

Zip 32952

Country USA

Zip 32952

Country USA

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

SHARKEY, GWEN G
1370 EDDY STREET
MERRITT ISLAND FL 32952

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME SHARKEY, KEVIN R
STREET ADDRESS 1370 EDDY STREET
CITY-ST-ZIP MERRITT ISLAND FL 32952 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME HATFIELD, MARY K
STREET ADDRESS 445 W. NORA AVENUE
CITY-ST-ZIP MERRITT ISLAND FL 32952 ☒ Delete

TITLE V.P.
NAME MARK ALAN Schneider
STREET ADDRESS 1370 Eddy St
CITY-ST-ZIP MERRITT IS, FL 32952-5729 ☒ Change ☐ Addition

TITLE ST
NAME HALL, THERESA J
STREET ADDRESS 280 RANGE ROAD
CITY-ST-ZIP COCOA FL 32926 ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin R Sharkey, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/03 321-453-7182
Date Daytime Phone #

CR2E034 (10/02)