

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90121 038 ***150.00

DOCUMENT # P01000099398

1. Entity Name
SANDY RUN CONSTRUCTION, INC.

Principal Place of Business
101 N. ANCHORAGE DRIVE
NORTH PALM BEACH FL 33408

Mailing Address
101 N. ANCHORAGE DRIVE
NORTH PALM BEACH FL 33408



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
101 N. Anchorage Drive
 Suite, Apt. #, etc.

3. Mailing Address
101 N. Anchorage Drive
 Suite, Apt. #, etc.

City & State
North Palm beach, FL.
Zip 33408
Country Palm beach

City & State
North Palm beach FL.
Zip 33408
Country Palm beach

4. FEI Number **65-1141509** ☒ **Applied For**
 Not Applicable

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

6. Name and Address of Current Registered Agent

BOYCE, DENNIS M
675 WEST WEST INDIANTOWN ROAD SUITE 103
JUPITER FL 33458

7. Name and Address of New Registered Agent

Name **John E Dougherty**
Street Address (P.O. Box Number is Not Acceptable)
101 N. Anchorage Drive
City **North Palm beach** **FL** **Zip Code** **33408**

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 *John E Dougherty* **4-23-02**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-stating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	DOUGHERTY, JOHN E
STREET ADDRESS	101 N. ANCHORAGE DRIVE
CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	D <input type="checkbox"/> Delete
NAME	DOUGHERTY, DIEDRA
STREET ADDRESS	101 N. ANCHORAGE DRIVE
CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John E Dougherty* **4-23-02** **561-630-5625**
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/01)