

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90026 009 ***150.00

DOCUMENT # P01000111099

1. Entity Name
STIDHAM'S ENTERPRISES, INC.

Principal Place of Business

~~7945 WALKER RD~~
~~BARTOW FL 33830~~

Mailing Address

~~7945 WALKER RD~~
~~BARTOW FL 33830~~

2. Principal Place of Business

2530 State Rd 60 W.
 Suite, Apt. #, etc.

3. Mailing Address

2530 State Rd 60 W
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

LAKE WALES, FL

City & State

LAKE WALES, FL

4. FEI Number

80-0023462

Applied For

Not Applicable

Zip
33859

Country
POIC

Zip
33859

Country
POIC

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STIDHAM, GEORGE W
~~7945 WALKER RD~~
~~BARTOW FL 33830~~

7. Name and Address of New Registered Agent

Name

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

2530 State Rd 60 W.

City

LAKE WALES

FL

Zip Code

33859

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 *George W Stidham*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-20-02

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 ☐
 Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STIDHAM, GEORGE W
STREET ADDRESS **7945 WALKER RD**
CITY-ST-ZIP **BARTOW FL 33830**

TITLE ☐ Delete
NAME **D**
STIDHAM, BRAD W
STREET ADDRESS **7945 WALKER RD**
CITY-ST-ZIP **BARTOW FL 33830**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE ☐ Change ☐ 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:

George W Stidham
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-20-02

(863) 537-9374

CR2E034 (9/01)