2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

2530 STATE ROAD 60 W

LAKE WALES FL 33859

P01000111099 **DOCUMENT #**

1. Entity Name

Principal Place of Business

SIGNATURE:

2530 STATE ROAD 60 W

LAKE WALES FL 33859

STIDHAM'S ENTERPRISES, INC.



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90252 034 ***150.00

Stilham 2/14/63 (863) 537-2827



JAKE WALES FI		US				
2. Principal Pla	ace of Business 5 WAIKER LK, Rd,	3. Mailing Address 7945 WAI	Kee LK.	Rd		
Suite, Apt. #		Suite, Apt. #, etc.	7507 1-1	☐ CHECK HERE IF MAKING CHANGES		
City & State	/1	City & State	11	4. FEI Number 80-0023462 Applied For Not Applicable		
BARtor	Country	BARtow, F	Country	5. Costificate of Status Desired \$8.75 Additional		
33830	o lusa _	33830	USA	7. Name and Address of New Registered Agent		
6. Name and Address of Current Registered Agent			Name	70		
STIDHAM, GEORGE W			Street Add	Street Address, (P.O. Box Number is Not Acceptable)		
2530 STATEROAD 60 W			79	945 WALER LK, Rd.		
LAKE WALES FL 33859						
			City \mathcal{B}	PARTON FL Zip Code 33830		
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 a	and title if applicable. (NOTE: F	Registered Agent signature	ture required when reinstating) DATE		
FI After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS	D STIDHAM, GEORGE W 7945 WALKER RD	☐ Delete	TITLE NAME STREET ADDRESS	1945 WAIKER LK. Rd. (Address)		
CITY-ST-ZIP	BARTOW FL 33830		CITY-ST-ZIP	BARTON, FI. 33830		
TITLE NAME STREET ADDRESS	D STIDHAM, BRAD W 7945 WALKER RD	☐ Delete	TITLE NAME STREET ADDRESS	7901 WAIKER LK. Rd. (Address)		
CITY-ST-ZIP	BARTOW FL 33830		CITY-ST-ZIP	BARTOW /1. 33830		
TITLE NAME STREET ADDRESS		□ Delete -	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
CITY-ST-ZIP TITLE NAME STREET ADDRESS		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS		☐ 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 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.						