

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000121812

FILED  
Mar 03, 2002 8:00 AM  
Secretary of State

Entity Name: SAGE CAMPIONE, P.A.

## Current Principal Place of Business:

445 SAND RIDGE DR  
VALRICO, FL 33594

## New Principal Place of Business:

## Current Mailing Address:

445 SAND RIDGE DR  
VALRICO, FL 33594

## New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMPIONE, SAGE  
445 SAND RIDGE DR  
VALRICO, FL 33594

## Name and Address of New Registered Agent:

CAMPIONE, SAGE DR.  
445 SAND RIDGE DR  
VALRICO, FL 33594

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: SAGE CAMPIONE

03/03/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CAMPIONE, SAGE  
Address: 445 SAND RIDGE DR  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition  
Name: CAMPIONE, SAGE  
Address: 445 SAND RIDGE DR  
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAGE CAMPIONE

DR

03/03/2002

Electronic Signature of Signing Officer or Director

Date