

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 05, 2003 8:00 am
Secretary of State

09-05-2003 90115 028 ***550.00

DOCUMENT # P02D000036816

1. Entity Name

Morgan Randolph Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

27127 Valencia Dr.

Punta Gorda FL

City & State

City & State

Punta Gorda FL

Punta Gorda FL

Zip

Country

Zip

Country

33955

Charlotte

33955

Charlotte

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

01-0657537

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Dwight A. Schattschneider

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

956 Sidney Terr. NW

City

Port Charlotte FL

FL

Zip Code

33948

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

Dwight A. Schattschneider

(NOTE: Registered Agent signature required when reinstating)

9/3/03

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
Morgan Randolph
27127 Valencia Dr.
Punta Gorda FL 33955

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE PRESIDENT
Dwight A. Schattschneider
956 Sidney Terr.
Port Charlotte FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Dwight A. Schattschneider

9/3/03

Date

Daytime Phone #

OR2E034B (12/02)