

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8/2

FILED
Sep 11, 2003 8:00 am
Secretary of State

08-29-2003 90092 020 ***150.00

DOCUMENT # P02000133857

1. Entity Name
S & L ENTERPRISES OF SOUTHWEST FLORIDA, INC



Principal Place of Business
**513 SE 4TH TERR
CAPE CORAL FL 33990**

Mailing Address
**513 SE 4TH TERR
CAPE CORAL FL 33990**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

06-1666707

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GAY, SARAH M
513 SE 4TH TERR
CAPE CORAL FL 33990**

Name

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

City

FL

Zip Code

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 **D** ☐ Delete
NAME **GAY, SARAH M**
STREET ADDRESS **513 SE 4TH TERR**
CITY-ST-ZIP **CAPE CORAL FL 33990**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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

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CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE:

Sarah M. Gay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08-08-03

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

55056342

P02000133857

S & L ENTERPRISES OF SW FL, INC

513 SE 4th Terrace

Cape Coral, FL 33990

25 August, 2003

Florida Department of State

Please accept my check for \$150.00 and renew my corporate status. I have had several problems over the last 6 months receiving my mail in a timely manner. I never received the first notice and only recently received the one I am mailing in with this letter. If you have any further questions or if there is a problem processing my paperwork please contact me at 239-458-9835.

Thank You,

Sarah Gay
Owner