

PO6000034203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

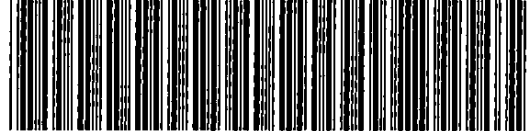
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900080160589

10/23/06--01004--005 **35.00

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : SLEEPY HOLLOW, INC.

2. The mailing address of the corporation : P.O. BOX 551061, Ft. Lauderdale, FL
33355-1061

3. Date of incorporation/qualification: 3/8/06 Document number: P06000034203

4. The name and address of the current registered agent and registered office:

EDDY B. GROSSE

8021 W. Delatree Lane

Crystal River, FL 34428

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
(P.O. Box NOT Acceptable)

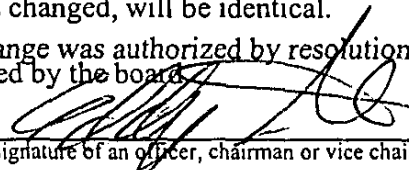
EDDY B. GROSSE

11900 Biscayne Blvd. Suite 290

North Miami, FL 33181

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.


(Signature of an officer, chairman or vice chairman of the board)

10/18/06
(Date)

EDDY B. GROSSE, REG. AGT.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.


(Signature of Registered Agent)

10/18/06
(Date)

If signing on behalf of an entity:

EDDY B. GROSSE, PRES.
(Typed or Printed Name)

(Capacity)

***** FILING FEE: \$35.00 *****

JUDGMENT LIEN CERTIFICATE

FOR PURPOSES OF FILING A JUDGMENT LIEN, THE FOLLOWING INFORMATION IS SUBMITTED IN ACCORDANCE WITH s. 55.203, FLORIDA STATUTES.

1. JUDGMENT DEBTOR (DEFENDANT) NAME AS SHOWN ON JUDGMENT, IF AN INDIVIDUAL, IS:

SNYDER

DELBERT

LAST NAME

FIRST NAME

M. I.

30074 N. Dee Bee Road

MAILING ADDRESS

Farmington

IL

61531

CITY

ST

ZIP

2. ADDITIONAL JUDGMENT DEBTOR, IF AN INDIVIDUAL, IS:

SNYDER

DEANNA

J.

LAST NAME

FIRST NAME

M. I.

30074 N. Dee Bee Road

MAILING ADDRESS

Farmington

IL

61531

CITY

ST

ZIP

3. JUDGMENT DEBTOR (DEFENDANT) NAME AS SHOWN ON JUDGMENT, IF A BUSINESS ENTITY, IS:

BUSINESS ENTITY NAME

MAILING ADDRESS

CITY

ST

ZIP

4. FEDERAL EMPLOYER IDENTIFICATION NUMBER:

5. DEPARTMENT OF STATE DOCUMENT FILE NUMBER:

PLEASE CHECK BOX IF DOCUMENT NUMBER IS NOT APPLICABLE



6. JUDGMENT CREDITOR (PLAINTIFF) NAME AS SHOWN ON JUDGMENT OR CURRENT OWNER OF JUDGMENT, IF ASSIGNED:

AgriBank FCB

CREDITOR NAME(S)

Credit Dept., P.O. Box 3849

MAILING ADDRESS

Champaign

IL

61826-3849

CITY

ST

ZIP

7. DEPARTMENT OF STATE DOCUMENT FILE NUMBER:

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8. OWNER'S ATTORNEY OR AUTHORIZED REPRESENTATIVE: (ACKNOWLEDGMENT OF FILING WILL BE SENT TO THIS ADDRESS)

NOEL R. BOEKE, ESQ., HOLLAND & KNIGHT LLP

NAME

P.O. BOX 1288

MAILING ADDRESS

TAMPA

CITY

FL

33601-1288

ST

ZIP

9. AMOUNT DUE ON MONEY JUDGMENT: **\$1,389,390.79**

10. APPLICABLE STATUTORY INTEREST RATE: **Eleven per cent (11%)**

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10/19/06--01002--020 **35.00

THIS SPACE FOR USE BY FILING OFFICER

11. NAME OF COURT:

7th Judicial Circuit

VOLUSIA COUNTY, FL

12. CASE NUMBER: **2001-10854-CIDL**

13. DATE OF ENTRY: **October 3**, **2001**
MONTH DAY YEAR

UNDER PENALTY OF PERJURY, I hereby certify that: (1) The judgment above described has become final and there is no stay of the judgment or its enforcement in effect; (2) All of the information set forth above is true, correct, current and complete; (3) I have not previously filed a Judgment Lien Certificate regarding the above judgment with the Department of State; and, (4) I have complied with all applicable laws in submitting this Judgment Lien Certificate for filing.

SIGNATURE OF CREDITOR OR AUTHORIZED REPRESENTATIVE

NOEL R. BOEKE

PRINT NAME

NON-REFUNDABLE PROCESSING FEE:

JUDGMENT LIEN WITH ONE DEBTOR \$20.00
EACH ATTACHED PAGE, IF NECESSARY \$ 5.00

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CERTIFIED COPY REQUESTED \$10.00 ☒

JUDGMENT LIEN CERTIFICATE

FOR PURPOSES OF FILING A JUDGMENT LIEN, THE FOLLOWING INFORMATION IS SUBMITTED IN ACCORDANCE WITH s. 55.203, FLORIDA STATUTES.

1. JUDGMENT DEBTOR (DEFENDANT) NAME AS SHOWN ON JUDGMENT, IF AN INDIVIDUAL, IS:

PATEL	GAURANJI	N.
LAST NAME	FIRST NAME	M. I.

13706 SUN COURT
MAILING ADDRESS

TAMPA FL 33624

- 2. ADDITIONAL JUDGMENT DEBTOR, IF AN INDIVIDUAL, IS:**

PATEL	NIKUNJ	A.
LAST NAME	FIRST NAME	M.I.

13706 SUN COURT

TAMPA FL 33624

3. JUDGMENT DEBTOR (DEFENDANT) NAME AS SHOWN ON JUDGMENT, IF A BUSINESS ENTITY, IS:

BUSINESS ENTITY NAME

MAILING ADDRESS

_____ CITY _____ ST _____ ZIP _____

4. FEDERAL EMPLOYER IDENTIFICATION NUMBER:

5. DEPARTMENT OF STATE DOCUMENT FILE NUMBER:

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6. JUDGMENT CREDITOR (PLAINTIFF) NAME AS SHOWN ON JUDGMENT OR CURRENT OWNER OF JUDGMENT, IF ASSIGNED: PARK NATIONAL BANK, a national banking

association, successor by merger with Regency
CREDITOR NAME (S) Savings Bank FSB, a

8 Greenway Plaza, Suite 1100 federal savings bank
MAILING ADDRESS

Huston	TX	77046
CITY	ST	ZIP

7. DEPARTMENT OF STATE DOCUMENT FILE NUMBER:

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8. OWNER'S ATTORNEY OR AUTHORIZED REPRESENTATIVE; (ACKNOWLEDGMENT OF FILING WILL BE SENT TO THIS ADDRESS)

NOEL R. BOEKE, ESQ., HOLLAND & KNIGHT LLP
NAME

P.O. BOX 1288

TAMPA	FL	33601-1288
CITY	ST	ZIP

9. AMOUNT DUE ON MONEY JUDGMENT: \$1,784,389.36

10. APPLICABLE STATUTORY INTEREST RATE: Nine per cent (9%)

**DO NOT PHOTOCOPY THIS FORM PRIOR TO USE.
BAR CODE MUST BE LEGIBLE.**



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THIS SPACE FOR USE BY FILING OFFICER

11. NAME OF COURT:

13TH JUDICIAL CIRCUIT
HILLSBOROUGH COUNTY, FL

12. CASE NUMBER: 02-11580

13. DATE OF ENTRY: SEPT. 25, 2006
MONTH DAY YEAR

UNDER PENALTY OF PERJURY, I hereby certify that: (1) The judgment above described has become final and there is no stay of the judgment or its enforcement in effect; (2) All of the information set forth above is true, correct, current and complete; (3) I have not previously filed a Judgment Lien Certificate regarding the above judgment with the Department of State; and, (4) I have complied with all applicable laws in submitting this Judgment Lien Certificate for filing.

SIGNATURE OF CREDITOR OR AUTHORIZED REPRESENTATIVE

NOEL R. BOEKE

PRINT NAME

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