

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P07559

1. Entity Name

MORTON H. SACHS & COMPANY

**FILED**  
**Mar 05, 2001 8:00 am**  
**Secretary of State**

03-05-2001 90069 023 \*\*\*150.00

Principal Place of Business

Mailing Address

1346 SOUTH THIRD ST  
LOUISVILLE KY 40208

1346 SOUTH THIRD ST  
LOUISVILLE KY 40208

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

61-0881884

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

**SACHS, MORTON H**  
**603 LONGBOAT CLUB ROAD**  
**UNIT N-101**  
**SARASOTA FL 34228**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME TS  
STREET ADDRESS SACHS, MORTON H.  
CITY-ST-ZIP 5421 HARBORTOWN ROAD, UNIT 211B  
PROSPECT KY 40059

TITLE ☒ Change ☐ Addition  
NAME TS  
STREET ADDRESS Sachs, Morton H.  
CITY-ST-ZIP 603 Longboat Club Road., N-101  
Sarasota, FL 34228

TITLE ☐ Delete  
NAME V  
STREET ADDRESS DOBBINS, JENNIFER S  
CITY-ST-ZIP 5800 ORION RD  
LOUISVILLE KY

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP Zip Code 40222

TITLE ☐ Delete  
NAME V  
STREET ADDRESS WANGERIN, INDA M.  
CITY-ST-ZIP 2325 CAROLINA AVE.  
LOUISVILLE KY 40205

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME P  
STREET ADDRESS SACHS, A. NICHOLAS  
CITY-ST-ZIP 46 HILL RD  
LOUISVILLE KY 40204

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. NICHOLAS SACHS

2-26-01 (502) 636-5282

Date

Daytime Phone #

CR2E034 (10/00)