2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P93000029761

1. Entity Name

SABAL CREEK DEVELOPMENT, INC.



FILED Mar 26, 2003 8:00 am Secretary of State

03-26-2003 90146 007 ***150.00

			COD WE	105	i				
952-B BIG TI	e of Business REE ROAD ONA FL 32119	Mailing Address P O BOX 214578 SOUTH DAYTONA FL 321214 US	4578						
2. Principal P	lace of Business	3. Mailing Address				11121 49 451 89 511 89 141 68 110		41181 1181 1841	
131-в	Business Center Drive	P.O. Box 1626							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			☐ CHEC	K HERE IF MAKING	CHANGES		
Suite							- 1 ia-	- C- of Figure	1
City & State Ormond Beach, FL		City & State Ormond Beach, FL		4.	FEI Number 59-3	187402		plied For t Applicable	ł
		Zip Country			<u></u>		\$8.75 Add		İ
Zip 32174	Country USA	32175	USA	5.	Certificate of Status I	Desired 🗌	Fee Required		İ
32174	6. Name and Address of Current R			7.	Name and Address	of New Registered		,	İ
	0. 114.110 4.10 1.10		Name						ı
BLEDSOE	, JAMES R.	The state of the s	5	· · · · · · · · · · · · · · · · · · ·				•	ł
	TREE ROAD	•			Box Number is Not Ac ness Center				Ì
	AYTONA FL 32119				ness ocheci	DIIVO			١.
3001111	ATTORATE SETTS		Suit	<u>e 11 </u>	·		T =		l
	·		City	nd Bea	ch	FL	Zip Code		İ
8. The above	named entity submits the statement for	the purpose of changing its reg	istered office or	registered a	gent, or both, in the S	state of Florida. I am	familiar with,	and accept	1
	ions of registered agent				٠.		1		ļ
		James Ronnie	Bledsoe.	Presi	dent -	3-24-0	بر. 3		١
SIGNATURE, .	Signature, upper or printed parke of registered agent ar	nd title if applicable. (NOTE: Reg	gistered Agent signatu			DATE	*,		l
	ILE NOW!!! FEE IS \$150.00	1				-			1
	May 1, 2003 Fee will be \$550.00	ı			1	npaign Financing		0 May Be	
	Payable to Florida Department of	State			Trust Fund C	Contribution.	J Added	I to Fees	
10.	OFFICERS AND D	DIRECTORS	11,	· A	DDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS	3 IN 11	ĺ
TITLE	DP	☐ Delete	TITLE		-		Change	☐ Addition	É
NAME	JAMES R. BLEDSOE		NAME		1		-		5
STREET ADDRESS	952-B BIG TREE ROAD		STREET ADDRESS	131-B	Business Co	enter Dřive	, Suite	- 11	3
CITY-ST-ZIP	SOUTH DAYTONA FL		CITY-ST-ZIP	Ormon	d Beach, FL	321.74			١
TITLE	DVPS	☐ Delete	TITLE	-			Change	☐ Addition	Ì
NAME	LORE L. BLEDSOE		NAME						
STREET ADDRESS	952-B BIG TREE ROAD		STREET ADDRESS		Business Co		, Suite	TT	
CITY-ST-ZIP	SOUTH DAYTONA FL	·	CITY-ST-ZIP	Ormon	d Beach, FL	321 /.4		<u></u>	┨
TITLE	D	☐ Delete	TITLE				☐ Change	☐ Addition	١.
NAME	SLIGER, STEPHEN B	157	NAME	المستراء الما	- 47-2		3		
STREET ADDRESS	3921 S NOVA ROAD		STREET ADDRESS*		•		•		1
CITY-ST-ZIP	PORT ORANGE FL 32127		CITY-ST-ZIP	-	<u> </u>				┨
TITLE		☐ Delete	TITLE				Change .	Addition	1
NAME			NAME STREET ADDRESS		1				}
STREET ADDRESS		•	CITY-ST-ZIP			`	'		
CITY-ST-ZIP				<u> </u>			Chance	Addition	ł
TITLE		☐ Delete	TITLE Name		•		☐ Change		
NAME STREET ADDRESS			STREET ADDRESS			•	1	-	
CITY-ST-ZIP			CITY-ST-ZIP			•			1
TITLE		□ Delete	TITLE			-	☐ Change	Addition	†
11111	T. Company of the Com	1 Delete	HILL	ı					1

12. Thereby 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 extrustee 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

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

REQUIRJames Ronnie Bledsoe

3-24-03

386-676-1501 Daytime Phone #