

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90128 025 ***150.00

DOCUMENT # P93000076680

1. Entity Name
SUGARPLUM FACTORY, INC.



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business
~~14 CHERRY AVE~~
~~WINTER SPRINGS FL 32708~~
1708 MIRA COURT
OVIEDO, FL. 32765

Mailing Address
~~120 E. PANAMA ROAD~~
~~WINTER SPRINGS FL 32708~~
1708 MIRA COURT
OVIEDO, FL. 32765

2. Principal Place of Business
1708 MIRA COURT
Suite, Apt. #, etc.

3. Mailing Address
1708 MIRA COURT
Suite, Apt. #, etc.

City & State
OVIEDO, FLORIDA
Zip
32765 Country
SEMINOLE

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4. FEI Number **59-3209118** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MAGILL, PATRICK M ESQ
2110 E. ROBINSON STREET
ORLANDO FL 32803

7. Name and Address of New Registered Agent
Name
VALERIE A. CRANE
Street Address (P.O. Box Number is Not Acceptable)
1118 BLACKACRE TRAIL
City
WINTER SPRINGS FL Zip Code
32708

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 *Valerie A. Crane* **VALERIE A. CRANE** DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	D ROADERICK, BERNARDINE F 120 E. PANAMA ROAD WINTER SPRINGS FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROADERICK, BERNARDINE F 1708 MIRA COURT OVIEDO, FLORIDA 32765	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 like empowered.

SIGNATURE: *Bernardine F. Roaderick* **BERNARDINE F. ROADERICK** Date **1/7/03** (407) 719-0120
Signature, typed or printed name of signing officer or director

CR2E034 (10/02)