

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State
 04-24-2002 90342 014 ***158.75

0401060 AV

DOCUMENT # P94000036259

1. Entity Name
STERLING II FLORIDA, INC.

Principal Place of Business

Mailing Address

~~200 PHIPPS PLAZA~~
~~PALM BEACH FL 33480~~
 US

~~200 PHIPPS PLAZA~~
~~PALM BEACH FL 33480~~
 US



2. Principal Place of Business

3. Mailing Address

One N. Clematis St.

One N. Clematis St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 305

Suite 305

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

4. FEI Number
65-0490911

Applied For

Not Applicable

Zip
33401

Country
USA

Zip
33401

Country
USA

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

KOSOY, BRIAN D
~~200 PHIPPS PLAZA~~
~~PALM BEACH FL 33480~~

Name

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

One North Clematis St.

Suite 305

City

West Palm Beach,

FL

Zip Code

33401

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	DP KOSOY, BRIAN D 200 PHIPPS PLAZA PALM BEACH FL 33480	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MOROSS, GREGORY S 200 PHIPPS PLAZA PALM BEACH FL 33480	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD SHREEVE, DAVID J 200 PHIPPS PLAZA PALM BEACH FL 33480	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COSTELLO, VINCENT J 200 PHIPPS PLAZA PALM BEACH FL 33480	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition One N. Clematis St. - Ste. 305 West Palm Beach, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition SAME AS ABOVE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition SAME AS ABOVE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition SAME AS ABOVE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-02 561-835-1810
 Date Daytime Phone #

CR2E034 (9/01)