

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90192 013 ***158.75

DOCUMENT # P94000091497

1. Entity Name

SGJ INC

Principal Place of Business

**201 COUNTY RD MH5
 BIG PINE KEY FL 33043
 US**

Mailing Address

**201 COUNTY RD MH5
 BIG PINE KEY FL 33043
 US**

2. Principal Place of Business

29064 PALMETTO DR

3. Mailing Address

PO Box 430552

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BIG PINE KEY FL

City & State

BIG PINE KEY FL

Zip

33043

Country

US

Zip

33043

Country

MONROE

4. FEI Number

65-0543288

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

**FERGUSON, SAMUEL
 201 COUNTY RD MH5
 BIG PINE KEY FL 33043**

Name

SAMUEL C FERGUSON

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

29064 PALMETTO DR

City

BIG PINE KEY

FL

Zip Code

33043

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

Samuel Ferguson

SAMUEL C FERGUSON

1-20-01

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	V	☒ Delete
NAME	PHILLIPS, JOE	
STREET ADDRESS	147 LOBSTER TAIL RD	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE	P	☐ Delete
NAME	FERGUSON, SAMUEL	
STREET ADDRESS	201 COUNTY RD MH5	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE	T	☐ Delete
NAME	FERGUSON, APRIL	
STREET ADDRESS	201 COUNTY RD MH5	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	☒ Change ☐ Addition
NAME	SAMUEL C FERGUSON	
STREET ADDRESS	29064 PALMETTO DR	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE	T	☒ Change ☐ Addition
NAME	FERGUSON, APRIL	
STREET ADDRESS	29064 PALMETTO DR	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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:

Samuel Ferguson

SAMUEL C FERGUSON

1-20-01 305-872-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)