

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90117 006 ***150.00

DOCUMENT # P95000002890

1. Entity Name
SPORTS NOOK, INC.

Principal Place of Business
**120 RUBY RED LANE
 LONGWOOD FL 32750**

Mailing Address
**120 RUBY RED LANE
 LONGWOOD FL 32750**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3290638**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

**WATERMAN, WILLIAM E
 120 RUBY RED LANE
 LONGWOOD FL 32750**

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 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 **D** ☐ Delete
 NAME **WATERMAN, WILLIAM E**
 STREET ADDRESS **120 RUBY RED LANE**
 CITY-ST-ZIP **LONGWOOD FL 32750**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
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 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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/01
 Date

407 1679529
 Daytime Phone #

CR2E034 (5/01)

Attachment
~~#~~P95000002890
B0060045

REGARDING FEI # 59-3290638

THE SPORTS NOOK INC.

7/6/01

SIR/MADAME,

PER INSTRUCTIONS I RECEIVED WHEN I CALLED
850 480-9000 ENCLOSED PLEASE FIND ACK FOR
\$150 AND A EXPLANATION.

I NEVER RECEIVED MY ORIGINAL 2001 UBR.
THAT WAS TO BE RETURNED ON 05/01/01. THE
REP ON THE YOUR PHONE (850-488-9000) SAID TO
EXPLAIN, SEND \$150 NOW AND HOPEFULLY SOME
CONSIDERATION CAN BE GIVEN ON THE LATE FEES
PLEASE ADVISE

Thank You
William E. Atkinson
THE SPORTS NOOK INC