

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 01, 2001 8:00 am**  
**Secretary of State**

06-01-2001 90005 032 \*\*\*150.00

0597810

**DOCUMENT # P95000071590**

1. Entity Name  
**SKR, INC.**

Principal Place of Business  
**600 RIDGEWOOD AVE.  
 HOLLY HILL FL 32117**

Mailing Address  
**4095 EMBASSY DRIVE SE  
 GRAND RAPIDS MI 49546  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

**ELSBERRY, MICHAEL V ESQ.  
 % LOWNDES, DROSDICK, DOSTER, KANTOR & REED  
 215 NORTH EOLA DR.  
 ORLANDO FL 32802**

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FLORIDA 33324**



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3338689**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

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 See attached Change form

(signature, typed or printed name of registered agent and title if applicable)

(NOT) 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!  
 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

TITLE **R Receiver** ☐ Delete  
 NAME **STENGER, PHILLIP S**  
 STREET ADDRESS **4095 EMBASSY DR SE**  
 CITY-ST-ZIP **GRAND RAPIDS MI 49546**

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 ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: Phillip Stenger Receiver  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/22/01 616-940-1190  
 Date Daytime Phone #

CR2E034 (10/00)

Attachment Doc # P9500071590

0070719

P95000071590

Requester's Name

Address

City/State/Zip

Phone #

700003509197--7  
-12/20/00--01078--013  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of State

FILED  
00 DEC 20 PM 2:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NEW FILINGS**

☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

P95006071590  
DEC 12 2000  
382

Examiner's Initials

Attachment Doc# P9500071591  
C0070719

**CERTIFICATE OF CHANGE OF  
REGISTERED AGENT/REGISTERED OFFICE  
OF  
SKR, INC.**

Pursuant to the provisions of Section 607.0502, Florida Statutes, SKR, INC., a corporation organized and existing under and by virtue of the laws of the State of Florida (the "Corporation"), hereby submits the following statement in designating a new Registered Office/Registered Agent, in the State of Florida:

1. The name of this corporation is:

**SKR, INC.**

2. The name and address of the current registered agent is:

Michael V. Elsberry  
215 North Eola Drive  
Orlando, Florida 32801

3. The name and address of the registered agent is to be changed to:

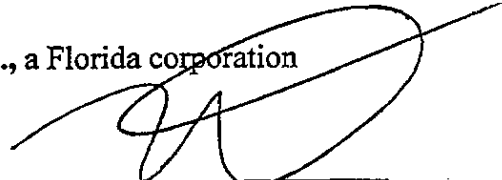
CT Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324

4. The street address of the registered office of the corporation and the street address of the business office of its registered agent, as changed, will be identical.

5. That Phillip S. Stenger, as Receiver of the Corporation has been authorized by resolution duly adopted by the board of directors to execute this Certificate of Change on behalf of the Corporation.

IN WITNESS, WHEREOF, the undersigned has executed this Certificate of Change as of the 7<sup>th</sup> day of <sup>November</sup> ~~September~~, 2000.

SKR, INC., a Florida corporation

By:   
Phillip S. Stenger, Receiver

FILED  
00 DEC 20 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Attachment Doc # P950007150  
CW70719

ACCEPTANCE OF REGISTERED AGENT

The undersigned hereby accepts the designation as Registered Agent of SKR, INC.

CT Corporation System

By: Vicky Goldstein  
Printed Name: VICKY GOLDSTEIN  
SPECIAL ASSISTANT SECRETARY