

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90328 019 ***150.00

B0076782



DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000008723

1. Entity Name

SANDPIPER MOBILE HOME COURT, INC.

Principal Place of Business

**5052 1ST COAST HIGHWAY
FERNANDINA BEACH FL 32034**

Mailing Address

**5052 1ST COAST HIGHWAY
FERNANDINA BEACH FL 32034**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3356609

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

RICE, JANETTE B**5052 1ST COAST HIGHWAY
FERNANDINA BEACH FL 32034**

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: **JANETTE B RICE**

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 State10. 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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	MDP RICE, JANETTE B	5022 1ST COAST HIGHWAY	FERNANDINA BEACH FL				
	DT BARBER, DAVID A	212-N EDEN DRIVE	CAYCE SC				
	VP NIX, GLENDA	26 GOETHE ST	BLUFFTON SC				
	CS WATKINS, ANN	325 W CAMBRIDGE AVE	GREENWOOD SC				

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: **Janette B. Rice**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-15-02 904-261-6957

NOTES: AV

NOTES: AV

CR2E034 (9/01)