

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000010865

1. Entity Name

STERLING PALMS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 16 PM 2:28

Principal Place of Business Mailing Address
223 WILMINGTON WEST CHESTER PIKE 215 NORTH EOLA DRIVE
CHADDS FORD, PA 19317 ORLANDO, FL 32801-2028

2. Principal Place of Business 3. Mailing Address
364 Wilmington West Chester Pike 215 North Eola Drive

Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
Glen Mills, PA Orlando, Florida 32801-2028

Zip Country Zip Country
19342 USA 32801 USA

4. FEI Number 23-2835875 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

BALLETTA, JAMES
215 NORTH EOLA DRIVE
ORLANDO, FL 32801

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 \$150.00
After MAY 1, 2000 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 DP ☐ Delete
NAME SPANO, CHRISTOPHER T.
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE
CITY-ST-ZIP CHADDS FORD, PA 19317

TITLE PD ☒ Change ☐ Addition
NAME SPANO, CHRISTOPHER T.
STREET ADDRESS 364 Wilmington West Chester Pike
CITY-ST-ZIP Glen Mills, PA. 19342

TITLE V ☐ Delete
NAME BALLETTA, JAMES
STREET ADDRESS 215 N. EOLA DRIVE
CITY-ST-ZIP ORLANDO, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 300003260073--3
CITY-ST-ZIP -05/13/00--0111--009

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

CHRISTOPHER T. SPANO, PRES

5/11/00

610-558-1600

CR2E034 (9/99)