

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000025170

1. Entity Name

SEBASTIAN HOUSING DEVELOPMENT CORPORATION

FILED

Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90095 040 ***150.00

Principal Place of Business

Mailing Address

4708 CLIPPER DR
BRADENTON FL 34208
US

4708 CLIPPER DR
BRADENTON FL 34221-9289
US

2. Principal Place of Business

3. Mailing Address

8807 71ST AVENUE E

8807 71ST AVENUE E

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALMETTO, FL

City & State

PALMETTO, FL

4. FEI Number

65-0653700

Applied For

Not Applicable

Zip

34221

Country

US

Zip

34221

Country

US

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

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BOULEVARD
1600 MIAMI CENTER
MIAMI FL 33131

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CARPERNTER, BETHANY A
4708 CLIPPER DR
BRADENTON FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BETHANY A. CARPENTER
8807 71ST AVENUE E.
PALMETTO, FL 34221

☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

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: *Bethany A. Carpenter*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BETHANY A. CARPENTER

1/5/00

Date

941-729-1700

Daytime Phone #