

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

0000338

DOCUMENT # P97000101411

1. Entity Name
SANDCASTLE INNOVATIONS, INC.

05-22-2001 90010 003 ***150.00

Principal Place of Business
**1784 HAMMOCK DR
 FERNANDINA BEACH FL 32034**

Mailing Address
**1784 HAMMOCK DR
 FERNANDINA BEACH FL 32034**

2. Principal Place of Business
2450 Will Hardee Road
 Suite, Apt. #, etc.

3. Mailing Address
2450 Will Hardee Road
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Fernandina Bch FL
 Zip
32034
 Country
Nassau

City & State
Fernandina Bch FL
 Zip
32034
 Country
Nassau

4. FEI Number **59-3489222**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CASEY, DEBORAH C
 1784 HAMMOCK DR
 FERNANDINA BEACH FL 32034**

7. Name and Address of New Registered Agent

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 *X Deborah Casey*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5-16-01

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PSTD
 CASEY, DEBORAH C
 1784 HAMMOCK DR
 FERNANDINA BEACH FL 32034** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V. President
 D. B. Heartsfield
 3045 S. Fletcher Ave
 Fernandina Bch FL 32034** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Secretary
 Elaine C. Heartsfield
 3045 S. Fletcher Ave
 Fernandina Bch FL 32034** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
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☐ Change ☐ Addition

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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: *X Deborah Casey*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-16-01 (904) 261-6340

CR2E034 (10/00)