

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000105743

1. Entity Name
SHARON'S GIFT SHOP, INC.

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

03-22-2001 90071 022 ***150.00

Principal Place of Business
P.O. BOX 400
BRADENTON FL 34206

Mailing Address
P.O. BOX 400
BRADENTON FL 34206



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0800975

Applied For
Not Applicable

Zip

Country

Zip

Country

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

POLLETT, SHARON
3234 EAST BAY DR.
HOLMES BEACH FL 34217

Name LaRow, Joyce I

Street Address (P.O. Box Number is Not Acceptable)

3234 East Bay Dr

City Holmes Beach

FL

Zip Code 34217

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 Joyce I LaRow - president

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/19/01

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 D
NAME POLLETT, SHARON
STREET ADDRESS P.O. BOX 14793 (NA)
CITY-ST-ZIP BRADENTON FL 34280 ☒ Delete

TITLE Director - President
NAME Joyce I LaRow
STREET ADDRESS 2312 64th St W
CITY-ST-ZIP Bradenton FL 34209 ☒ Change ☐ Addition

TITLE D
NAME DIETERMAN, ALMER
STREET ADDRESS 4812 KIMBALL SE
CITY-ST-ZIP GRAND RAPIDS MI 49508 ☒ Delete

TITLE Sec/Treas - Director
NAME William C LaRow
STREET ADDRESS 2312 64th St W
CITY-ST-ZIP Bradenton FL 34209 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
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: William C LaRow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/19/01

Daytime Phone #

941-778-3548

CR2E034 (10/00)