FILED
Mar 03, 2002 8:00 am
Secretary of State

03-03-2002 90059 044 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000009903

1. Entity Name

SOUTH VILLAGE, INC.

Principal Place of Business	Mailing Address
999 CATTLEMEN RD UNIT F SARASOTA FL 34232-2949	999 CATTLEMEN RD UNIT F SARASOTA FL 34232-2949

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4647 E Robin Hood Tr	4647 E Robin Hood Tr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sarasota FL	City & State: Sarasota FL
Zip: 34232-2642 Country:	Zip: 34232-2642 Country:

4. FEI Number: 65-0812754 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PAQUETTE, DENNIS
4647 E. ROBINHOOD TRAIL
SARASOTA FL 34232-2642

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: [signature] 1/9/02

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 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 PAQUETTE, DENNIS 4647 E. ROBINHOOD TRAIL SARASOTA FL 34232-2642	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PHILLIPS, PHILIP L 4647 E. ROBINHOOD TRAIL SARASOTA FL 34232-2642	☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (9/01)

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: [signature] DENNIS PAQUETTE 1/9/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #