

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90063 046 ***150.00

DOCUMENT # P98000028867

1. Entity Name

SOVEREIGN BUILDING INVESTMENT CORPORATION

Principal Place of Business

C/O SAVAGE, KRIM, SIMONS, & JONES LLC
 121 NW 3RD STREET
 Ocala FL 34475
 US

Mailing Address

C/O SAVAGE, KRIM, SIMONS, & JONES LLC
 121 NW 3RD STREET
 Ocala FL 34475
 US

2. Principal Place of Business

3. Mailing Address

c/o Fischer Law Office

Suite, Apt. #, etc.

18 NW 3rd Avenue

Suite, Apt. #, etc.

18 NW 3rd Avenue

City & State

Ocala, FL

City & State

Ocala, FL

4. FEI Number

59-3504975

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

FISCHER, TIMOTHY A

~~121 NW 3RD STREET~~

~~Ocala FL 34475~~

Name

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

18 NW 3rd Avenue

City *Ocala*

FL

Zip Code

34475

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

Timothy A. Fischer

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 **DVT** ☐ Delete
 NAME **STANDLEY, JOSEPH W SR.**
 STREET ADDRESS **121 NW 3RD STREET**
 CITY-ST-ZIP **OCALA FL 34475**

TITLE ☒ Change ☐ Addition
 NAME *18 NW 3rd Avenue*
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DPAS** ☐ Delete
 NAME **FISCHER, STEPHEN E**
 STREET ADDRESS **121 NW 3RD STREET**
 CITY-ST-ZIP **OCALA FL 34475**

TITLE ☒ Change ☐ Addition
 NAME *18 NW 3rd Avenue*
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DVS** ☐ Delete
 NAME **FISCHER, TIMOTHY A**
 STREET ADDRESS **121 NW 3RD STREET**
 CITY-ST-ZIP **OCALA FL 34475**

TITLE ☐ Change ☐ Addition
 NAME *18 NW 3rd Avenue*
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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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:

Timothy A. Fischer
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Timothy A. Fischer 4/4/02 (352)622-4257
 Date Daytime Phone #

0534688 AV

CR2E034 (9/01)