

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000031065

1. Entity Name

STERLING CONSULTING COMPANY

Principal Place of Business

238 WILSHIRE BLVD SUITE 149
CASSELBERRY FL 32707

Mailing Address

238 WILSHIRE BLVD SUITE 149
CASSELBERRY FL 32707

2. Principal Place of Business

120 ST. CROIX AVE

Suite, Apt. #, etc.

3. Mailing Address

120 ST. CROIX AVE

Suite, Apt. #, etc.

City & State

COCOA BEACH, FL

City & State

COCOA BEACH, FL

Zip

32-931-

Country

USA

Zip

32931-

Country

USA

4. FEI Number

59-3511562

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BALDRIDGE, ORVILLE
238 WILSHIRE BLVD SUITE 149
CASSELBERRY FL 32707

7. Name and Address of New Registered Agent

Name

CHARLES R. KIEFNER

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

120 ST. CROIX AVE

City

COCOA BEACH

FL

Zip Code

32931

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

CHARLES R. KIEFNER *Charles R. Kiefner* SEC

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

(NOTE: Registered Agent signature required when re-stating)

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 \$550.00

After SEPTEMBER 13, 2000 Min. will be \$750.00

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

TITLE D ☒ Delete
NAME BALDRIDGE, ORVILLE
STREET ADDRESS 1154 GALAHAD DRIVE
CITY-ST-ZIP CASSELBERRY FL 32707

TITLE D ☐ Delete
NAME KIEFNER, CHARLES
STREET ADDRESS 321 KING CT
CITY-ST-ZIP CASSELBERRY-FL 32707

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☒ Change ☐ Addition
NAME JOHN P. ANDERSON
STREET ADDRESS 797 N. HIGH ST
CITY-ST-ZIP PALM SPRINGS, CA 92262

TITLE S/D ☐ Change ☐ Addition
NAME
STREET ADDRESS 120 ST. CROIX AVE
CITY-ST-ZIP COCOA BEACH, FL 32931

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

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

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

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:

CHARLES R. KIEFNER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8/6/00 321-799-3842

Daytime Phone #

A0071631



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)