

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2002 8:00 am
Secretary of State

03-15-2002 90016 015 ***150.00

DOCUMENT # P98000031065

1. Entity Name
STERLING CONSULTING COMPANY

Principal Place of Business

~~120 ST CROIX AVE~~
COCOA BEACH FL 32931
US

Mailing Address

~~120 ST CROIX AVE~~
COCOA BEACH FL 32931
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

205 S. BANANA RIVER DR

Suite, Apt. #, etc.

401

City & State

COCOA BEACH, FL

Zip

32931

Country

USA

3. Mailing Address

205 S. BANANA RIVER DR

Suite, Apt. #, etc.

401

City & State

COCOA BEACH, FL

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

KIEFNER, CHARLES R

120 ST CROIX AVE

COCOA BEACH FL 32931

7. Name and Address of New Registered Agent

Name

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

205 S. BANANA RIVER DR #401

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*

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

TITLE ☐ Delete

NAME **PTSD KIEFNER, CHARLES**

STREET ADDRESS **921 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

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS **205 S. BANANA RIVER BLVD, #401**

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

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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:

Charles R Kiefner
CHARLES R KIEFNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/02 321-799-3842

Date

Daytime Phone #

CR2E034 (9/01)