

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 23, 2002 8:00 am**  
**Secretary of State**

07-23-2002 90342 049 \*\*\*550.00

**DOCUMENT # P98000049271**

1. Entity Name

**SANDERS AND SANDERS, INCORPORATION**

Principal Place of Business

**32900 WASHINGTON LOOP RD.  
PUNTA GORDA FL 33982**

Mailing Address

**P. O. DRAWER 511535  
PUNTA GORDA FL 33951-1535**

00131833



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0848476**

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

**SANDERS, ROBERT E**

**32900 WASHINGTON LOOP RD.  
PUNTA GORDA FL 33982**

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, 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 ☐ Delete  
NAME **P**  
STREET ADDRESS **SANDERS, ROBERT E**  
CITY-ST-ZIP **32900 WASHINGTON LOOP RD  
PUNTA GORDA FL 33982**

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

TITLE ☐ Delete  
NAME **S**  
STREET ADDRESS **SANDERS, ANN G**  
CITY-ST-ZIP **32900 WASHINGTON LOOP RD  
PUNTA GORDA FL 33982**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Delete  
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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:

*Robert E. Sanders* **Robert E. Sanders**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**6-12-02**

CR2E034 (9/01)

*Attachment*

*P 9800004827*

**Sanders and Sanders, Inc.  
P.O. Box 511535  
Punta Gorda, FL 33951-1535**

State of Florida  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

**RE: Uniform Business Report**

Dear Sir or Madam:

This letter is to request a waiver to the filing fee for the Uniform Business Report. I am the treasurer for the corporation and handle reporting. However, in addition, I do international consulting. During May I was out of the country working for the U.S. Government in Nigeria and was unable to pay by your due date.

Since we are an extremely small corporation, we are hoping that you will grant the waiver. In the meantime, enclosed is a check for \$150.00. Although I am leaving to return to Nigeria tomorrow, I have alerted Robert Sanders, President, to be on the lookout for any correspondence from you.

Thank you for this consideration.

Sincerely,

*Ann G. Sanders*

**Ann G. Sanders  
Treasurer**

enclosure



*P98000049271*

FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 26, 2002

SANDERS AND SANDERS, INCORPORATION  
P. O. DRAWER 511535  
PUNTA GORDA, FL 33951-1535

SUBJECT: SANDERS AND SANDERS, INCORPORATION  
Ref. Number: P98000049271

We have received your document for SANDERS AND SANDERS, INCORPORATION and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers  
Document Specialist

Letter Number: 202A00040933