

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000084115**

1. Entity Name

SUMTER CROSSING PROPERTIES, INC.**FILED****Apr 17, 2001 8:00 am**
Secretary of State

04-17-2001 90171 021 ***150.00

Principal Place of Business

Mailing Address

~~7335 GALL BLVD., #2-~~
~~ZEPHYRHILLS FL 33541~~~~7335 GALL BLVD., #2-~~
~~ZEPHYRHILLS FL 33541~~

2. Principal Place of Business

411 Commercial Court

3. Mailing Address

411 Commercial CourtSuite, Apt. #, etc.
Suite ESuite, Apt. #, etc.
Suite ECity & State
Venice, FLCity & State
Venice, FLZip
34292

Country

Zip
34292

Country

342924. FEI Number **59-3629811**

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****BINGHAM, JAMES H**~~7335 GALL BLVD., #2-~~
~~ZEPHYRHILLS FL 33541~~

Name

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

411 Commercial Court, Suite ECity
Venice**FL**Zip Code
34292

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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	DP BINGHAM, JAMES H 7335 GALL BLVD., #2 ZEPHYRHILLS FL 33541	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST OAKLEY, THOMAS E 7335 GALL BLVD., #2 ZEPHYRHILLS FL 33541	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Daniel C. McCormic 9288 County Road 121 Wildwood, FL 34785	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
411 Commercial Court, Suite E Venice, FL 34292	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DVP Daniel C. McCormic 9288 County Road 121 Wildwood, FL 34785	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

James H. Bingham

Date

Daytime Phone #

CR2E034 (10/00)