

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000088495

1. Entity Name

WILLIAM SANDERS A/C, INC.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90038 039 ***150.00

Principal Place of Business

Mailing Address

5484 2ND RD.
LAKE WORTH FL

5484 2ND RD.
LAKE WORTH FL 33467-5622

2. Principal Place of Business

3025 Matthews Rd

3. Mailing Address

3025 Matthews Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Ft. Pierce FL

City & State

Ft. Pierce FL

4. FEI Number

65-0878585

Applied For

Not Applicable

Zip

Country

34945 St. Lucie

Zip

Country

34945 St. Lucie

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, WILLIAM
5484 2ND RD.
LAKE WORTH FL

Name Sanders, William

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

3025 Matthews Rd

City Ft. Pierce

FL

Zip Code

34945

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, 2000 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 PD ☐ Delete
NAME SANDERS, WILLIAM
STREET ADDRESS 5484 2ND RD.
CITY-ST-ZIP LAKE WORTH FL

TITLE PD ☒ Change ☐ Addition
NAME Sanders, William
STREET ADDRESS 3025 Matthews Rd
CITY-ST-ZIP Ft. Pierce FL 34945

TITLE TS ☐ Delete
NAME SANDERS, FLORENCE
STREET ADDRESS 5484 2ND RD.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE TS ☒ Change ☐ Addition
NAME Sanders, Florence
STREET ADDRESS 3025 Matthews Rd
CITY-ST-ZIP Ft. Pierce 34945

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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:

William Sanders 4/28/00 1-561-595-3490

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

William Sanders.

CR2E034 (9/99)