

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

0119261 AV

DOCUMENT # P99000006518

1. Entity Name

STILLWATER DEVELOPMENT CORP.

02-05-2002 90022 042 ***150.00

Principal Place of Business

**1845 IXORA DR. WEST
 MELBOURNE FL 32935**

Mailing Address

**1845 IXORA DR. WEST
 MELBOURNE FL 32935**

2. Principal Place of Business

2950 Flagstaff Ave SE
 Suite, Apt. #, etc.

3. Mailing Address

2950 Flagstaff Ave SE
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palm Bay, FL

City & State

Palm Bay, FL

4. FEI Number

59-3561928

Applied For

Not Applicable

Zip

32909

Country

USA

Zip

32909

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**RITCHIE, SCOTT
 1845 IXORA DR. WEST
 MELBOURNE FL 32935**

7. Name and Address of New Registered Agent

Name **Scott Ritchie**

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

2950 Flagstaff Ave SE

City **Palm Bay**

FL

Zip Code

32909

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

Scott T. Ritchie

Scott T. Ritchie

8 Jan 2002

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 **P** ☐ Delete
 NAME **RITCHIE, SCOTT**
 STREET ADDRESS **1845 IXORA DR. W**
 CITY-ST-ZIP **MELBOURNE FL 32935**

TITLE **VP** ☐ Delete
 NAME **CARSON, GERALD**
 STREET ADDRESS **1215 HIAWATHA ST**
 CITY-ST-ZIP **MELBOURNE FL 32935**

TITLE **TS** ☐ Delete
 NAME **AUDET, KEN**
 STREET ADDRESS **1471 OPERETTA AVE.**
 CITY-ST-ZIP **PALM BAY FL 32909**

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** ☒ Change ☐ Addition
 NAME **Ritchie, Scott**
 STREET ADDRESS **2950 Flagstaff Ave SE**
 CITY-ST-ZIP **Palm Bay FL 32909**

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

TITLE ☐ Change ☐ Addition
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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:

Scott T. Ritchie **SCOTT T. RITCHIE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/02

Date

321-435-5382

Daytime Phone #

CR2E034 (9/01)