

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State
 04-23-2001 90135 020 ***150.00

DOCUMENT # P99000008771

1. Entity Name
SHEFFIELD SURPRISES, INC.

Principal Place of Business 2795 OCEAN OAKS DRIVE N. FERNANDINA BEACH FL 32034	Mailing Address 2795 OCEAN OAKS DRIVE N. FERNANDINA BEACH FL 32034
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3556543	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SHEFFIELD, WES 2334 E. STATE ROAD 200 SUITE 300 FERNANDINA BEACH FL 32034	7. Name and Address of New Registered Agent Name Jennifer Kelly-Sheffield Street Address (P.O. Box Number is Not Acceptable) 2795 N. Ocean Oaks Drive City Fernandina Beach FL 32034 Zip Code
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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 Jennifer Lynn Kelly-Sheffield **Jennifer Lynn Kelly-Sheffield** **1-24-2001**
(Signature, type or printed name of registered agent and fee applicable. (NOT required if signature required when filing)) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEFFIELD, JENNIFER 2795 OCEAN OAKS DRIVE N. FERNANDINA BEACH FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHEFFIELD, GEORGE W 2795 OCEAN OAKS DRIVE N FERNANDINA BEACH FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

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: Jennifer Lynn Kelly-Sheffield **Jennifer Lynn Kelly-Sheffield** **1-24-01** **904-277-7034**
(Signature, type or printed name of signing officer or director) Date Daytime Phone #

CR2E034 (10/00)