

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2002 8:00 am
Secretary of State

08-29-2002 90004 023 ***150.00

DOCUMENT # P99000009310

1. Entity Name
CHARLES D. SAPP, INC.

Principal Place of Business

4051 NW 43 ST STE 37
GAINESVILLE FL 32606

Mailing Address

4051 NW 43 ST STE 37
GAINESVILLE FL 32606

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

59-3566566

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

SAPP, CHARLES D
4051 NW 43 ST STE 37
GAINESVILLE FL 32606

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SAPP, CHARLES D
4051 NW 43 ST STE 37
GAINESVILLE FL 32606 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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CITY - ST - ZIP ☐ Delete

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

Charles D. Sapp
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

B-26-02 352-336-3555

Date

Daytime Phone #

CR2E034 (4/02)

J. J. LUCKEY
& CO.

Certified Public Accountants

Attachment
#P99000009310
977278
Pine Grove Professional Center
4045 NW 43rd Street, Suite A
Gainesville, Florida 32606
Phone: (352) 377-7171
Fax: (352) 379-2705

August 26, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Charles D. Sapp, Inc.
Document #P99000009310

To Whom It May Concern:

The above referenced client just this week received the enclosed 2002 Uniform Business Report. However, they never received the first report which would have been due on May 1, 2002. Charles D. Sapp, Inc. is a new corporation and since they never received the first report was unaware the original form should have been filed by May 1, 2002.

We are requesting you accept the enclosed check for \$150 due to the explanation stated above. Should you have any questions, please feel free to contact our office.

Sincerely,

J. J. Luckey CPA
J.J. Luckey, CPA

JJL:rjn
Enclosures