

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041177

1. Entity Name
SEAN P. SHEPPARD, ATTORNEY AT LAW, P.A.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91128 014 ***158.75

Principal Place of Business

101 ORANGE STREET
SAINT AUGUSTINE FL 32084

Mailing Address

101 ORANGE STREET
SAINT AUGUSTINE FL 32084

2. Principal Place of Business

99 ORANGE STREET

Suite, Apt. #, etc.

3. Mailing Address

99 ORANGE STREET

Suite, Apt. #, etc.

City & State

SAINT AUGUSTINE, FL

City & State

SAINT AUGUSTINE, FL

Zip

32084

Country

USA

Zip

32084

Country

USA

4. FEI Number 59-3562158

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHEPPARD, SEAN P
3119 SPRING GLEN RD., STE. 101
JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name
SEAN P. SHEPPARD
Street Address (P.O. Box Number is Not Acceptable)
99 ORANGE STREET
City
SAINT AUGUSTINE FL Zip Code
32084

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 SEAN P. SHEPPARD / President / Registered Agent 4/26/2001
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 State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
NAME SHEPPARD, SEAN P
STREET ADDRESS 101 ORANGE STREET
CITY-ST-ZIP SAINT AUGUSTINE FL 32084 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME SEAN P. SHEPPARD
STREET ADDRESS 99 ORANGE STREET
CITY-ST-ZIP SAINT AUGUSTINE, FL 32084 ☒ Change ☐ Addition

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

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

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

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

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: SEAN P. SHEPPARD, President 4/26/01 904 825 4991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)