

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 06, 2001 8:00 am
Secretary of State

06-19-2001 90007 022 ***150.00

DOCUMENT # <u>990000190001</u>			
1. Entity Name <u>SONSHINE Enterprises of</u> <u>Panama City, Inc.</u> LA			
Principal Place of Business		Mailing Address	
2. Principal Place of Business <u>3604 W. 15th Street</u> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <u>3604 W. 15th Street</u> <small>Suite, Apt. #, etc.</small>	
City & State <u>Panama City, FL</u> <small>Zip</small> <u>32401</u> <small>Country</small> <u>Bay</u>		City & State <u>Panama City, FL</u> <small>Zip</small> <u>32401</u> <small>Country</small>	
4. FEI Number		Applied For <input checked="" 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		7. Name and Address of New Registered Agent	
<u>Barbara Hutchison</u> <u>3604 W. 15th Street</u> <u>Panama City, FL 32401</u>		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.			
SIGNATURE <u>Barbara Hutchison</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<u>4/30/01</u> <small>DATE</small>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input checked="" type="checkbox"/> <small>(See criteria on back)</small>		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 <input type="checkbox"/>		\$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	<u>Barbara Hutchison, Pres.</u> <u>3604 W. 15th Street</u> <u>Panama City, FL 32401</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
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
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
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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 life empowered.			
SIGNATURE: <u>Barbara Hutchison</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4/30/01</u> <u>850</u> <u>235-4109</u> <small>Date Daytime Phone #</small>	

Attachment

20001 UNIFORM BUSINESS REPORT (UBR)

9478
[REDACTED]
DT# 0000019801

Entity Name:

SONSHINE Enterprises of Panama City, Inc. P99-19061

Principal Place of Business:

3604 W. 15th Street
Panama City, FL 32401

Mailing Address:

3604 W. 15th Street
Panama City, FL 32401

Bay County

Barbara Hutchison 4/30/01
Barbara Hutchison (President) Date (04302001)

The Corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so (X).

Barbara Hutchison 4/30/01
Barbara Hutchison (President) Date (04302001)
850/785-3344 or
850/234-4039

Note: In lieu of the State form, I'm submitting my own because ... I guess I'm just getting old and I've misplaced yours... sorry for any trouble this may cause you.