

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT -9 PM 1:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000037448

1. Entity Name

MICHELLE L. SHERWOOD, INC.

DO NOT WRITE IN THIS SPACE

980564

2. Principal Place of Business

940 CLEARWATER-LARGO RD

3. Mailing Address

11327-119TH TERRACE N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

LARGO, FLORIDA

City &amp; State

LARGO, FLORIDA

Zip

33770

PINELLAS

Zip

33778

Country

PINELLAS

4. FEI Number

59-3572323

Applied For

Not Applicable

5. Certificate of Status Desired

X \$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
Michelle L. SherwoodStreet Address (P.O. Box Numbers Not Acceptable)  
11327-119TH TERRACE N.

City LARGO

FL

Zip Code

33778

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when transferring)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)☐January 1 - May 1 Fee is \$150.00  
After May 1 Fee is \$350.00  
Amended UBR is \$81.25  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution.☐\$5.00 May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	P
NAME	SHERWOOD, MICHELLE L.
STREET ADDRESS	11327-119TH TERRACE N.
CITY-ST-ZIP	LARGO, FLORIDA 33778
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowerments.

SIGNATURE: Michelle L. Sherwood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-10-02

Date

Daytime Phone

CR2E034B (12/01)

js 10/9/02

Attachment  
980564  
P990000 37448  
Michelle L. Sherwood, Inc.  
Michelle L. Sherwood, President  
11327 119<sup>th</sup> Terrace North  
Largo, Florida 33778

September 6, 2002

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find my Uniform Business Report and a check in the amount of \$158.75 to cover the fee for filing.

I originally sent in my original UBR and a check in April 2002. I have checked with my bank and the check was never processed. Also, your office has no record of receiving it.

Please accept the enclosed replacement report and my check for the original filing fee.

Thank you in advance for your cooperation.

Sincerely,



Michelle L. Sherwood