2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2003 8:00 am
Secretary of State
03-05-2003 90047 009 ***150.00

DOCUMENT # **P99000055578**

1. Entity Name
STADI HOMES INC.

Principal Place of Business	Mailing Address
6611 WINTERSET GARDENS ROAD WINTER HAVEN, FL 33884	6611 WINTERSET GARDENS ROAD WINTER HAVEN, FL 33884

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
339 Hamilton Shore Dr., N.E.	2015 8th Terrace S.E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Winter Haven, FL	City & State: Winter Haven, FL
Zip: 33881 ~~33880~~ Country: USA	Zip: 33880 Country: USA

4. FEI Number: **59-3585366** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FISHERS, KATE
CHASTANG, FERRELL, SIMS& EISERMAN, L.L.C.
1400 W FAIRBANKS AVE STE 102
WINTER PARK, FL 32789-7171

7. Name and Address of New Registered Agent

Name: Jane E. Lamberson, CPA
Street Address (P.O. Box Number Is Not Acceptable): 8955 Fontana Del Sol Way
City: Naples FL Zip Code: 34109

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: Jane E. Lamberson Jane E. Lamberson 2/4/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STARKMAN, RALF DIETER 2015 8TH TERR S.E. WINTER HAVEN, FL 33880	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P, VP, T, S, D Starkmann, Ralf D.	☒ Change ☐ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. Starkmann STARKMANN 03/03/03 8632959162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #