

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # P99000062834**1. Entity Name
SUNSET RIPPER, INC.**Principal Place of Business**

3913 ROBERTS POINT ROAD

SARASOTA

34242

FL

US

Mailing Address

4222 LANAI DR.

SARASOTA

342415600

FL

US

2. Principal Place of Business

4222 LANAI DRIVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA

FL

City & State

Zip

34241

Country

US

Zip

Country

4. FEI Number**65-0939401**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**KONDOR CANDACE C**
3913 ROBERTS POINT ROAD

SARASOTA

342421160

FL

US

7. Name and Address of New Registered Agent**Name****KONDOR CANDACE C****Street Address (P.O. Box Number is Not Acceptable)**

4222 LANAI DRIVE

City

SARASOTA

FL**Zip Code**

342415600

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 **CANDACE C. KONDOR**

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

(NOTE: Registered Agent signature required when reinstating)

04/30/2001

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	<input type="checkbox"/> Delete
NAME	KONDOR STEPHEN	
STREET ADDRESS	3913 ROBERTS POINT ROAD	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	D	<input type="checkbox"/> Delete
NAME	KONDOR CANDACE C	
STREET ADDRESS	3913 ROBERTS POINT ROAD	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	D	<input type="checkbox"/> Delete
NAME	FERENCZ SARAH-ASHLEY	
STREET ADDRESS	3913 ROBERTS POINT ROAD	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KONDOR STEPHEN	
STREET ADDRESS	4222 LANAI DRIVE	
CITY-ST-ZIP	SARASOTA FL 342415600	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KONDOR CANDACE C	
STREET ADDRESS	4222 LANAI DRIVE	
CITY-ST-ZIP	SARASOTA FL 342415600	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERENCZ SARAH-ASHLEY	
STREET ADDRESS	4222 LANAI DRIVE	
CITY-ST-ZIP	SARASOTA FL 342415600	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Candace C. Kondor

VP

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)