

AMENDED
**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000099211

1. Entity Name

Sovrel Development Sawgrass Lakes, Inc.

FILED
Jul 18, 2002 8:00 A.M.
Secretary of State

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

298 SW Panther Trace

Suite, Apt. #, etc.

3. Mailing Address

298 SW Panther Trace

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Port St. Lucie, FL

City & State

Port St. Lucie, FL

4. FEI Number

65-0960340

Applied For

Not Applicable

Zip

34953

Country

USA

Zip

34953

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Steven L. Perry

Street Address (P.O. Box Number is Not Acceptable)

2400 SE Federal Highway

Fourth Floor

City

Stuart

FL

Zip Code
34994

**DO NOT WRITE
IN THIS SPACE**

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 reappointing)

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 \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY - ST - ZIP

**President
Bret Sovrel
298 SW Panther Trace
Port St. Lucie, FL 34953**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**Vice President
Lee Kimmel
298 SW Panther Trace
Port St. Lucie, FL 34953**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**Secretary
Bret Sovrel
298 SW Panther Trace
Port St. Lucie, FL 34953**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**Treasurer
Bret Sovrel
298 SW Panther Trace
Port St. Lucie, FL 34953**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**Associate Secretary
Lee Kimmel
298 SW Panther Trace
Port St. Lucie, FL 34953**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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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 on an attachment with an address, with all other not empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date:

6-25-02

Daytime Phone #

829-1080

CR2E034B (12/01)