

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000106060

1. Entity Name

STERLING REALTY ENTERPRISES, INC.

FILED

May 03, 2000 8:00 am
Secretary of State

05-03-2000 90095 045 ***150.00

Principal Place of Business

Mailing Address

4565 NAUTICAL CT.
DESTIN FL 32541

4565 NAUTICAL CT.
DESTIN FL 32541

2. Principal Place of Business

3. Mailing Address

1708 Old Hwy 98

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Destin, FL

Zip 32541 Country Walton

Zip Country

4. FEI Number

59-3611913

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Bryan J. Kiefer

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

1708 Old Hwy 98

City

Destin

FL

Zip Code

32541

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 reinstating)

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
KIEFER, KATHY P
4565 NAUTICAL CT.
DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Change ☐ 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/00 (850) 650-340