

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S48831

1. Entity Name

SPORT CONSTRUCTION CO.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90163 029 ***150.00

Principal Place of Business

24 DOCKSIDE LANE
PMB 485
KEY LARGO FL 33037
US

Mailing Address

24 DOCKSIDE LANE
PMB 485
KEY LARGO FL 33037
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0258080

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

~~SPORT, WILLIAM A~~
~~24 DOCKSIDE LANE, PMB 485~~
~~KEY LARGO FL 33037~~

7. Name and Address of New Registered Agent

Name ANDREA GENTILE

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

28 B MARLIN LANE

City

Key Largo

FL

Zip Code

33037

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

Andrea Gentile

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, 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 checked="" type="checkbox"/> Delete
NAME	SPORT, WILLIAM A.	
STREET ADDRESS	100 ANCHOR DR #485	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SPORT, BRENDA P.	
STREET ADDRESS	100 ANCHOR DR #485	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	PSD	<input type="checkbox"/> Delete
NAME	GENTILE, ANDREA	
STREET ADDRESS	28 B MARTIN LANE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LANE, JAMES	
STREET ADDRESS	706 BARCELONA RD	
CITY-ST-ZIP	KEY LARGO FL 33037	
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		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	24 DOCKSIDE LANE PMB 485	
STREET ADDRESS	24 DOCKSIDE LANE PMB 485	
CITY-ST-ZIP	24 DOCKSIDE LANE PMB 485	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	28 B MARLIN LANE	
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:

Andrea Gentile

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-19-01

705 3674110

CR2E034 (10/00)