

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90071 029 ***150.00

DOCUMENT # V24425

1. Entity Name
SANHAYDAN, INC.

Principal Place of Business

101 N WOODLAND BLVD.
STE 2121
DELAND FL 32720
US

Mailing Address

101 N WOODLAND BLVD.
STE 2121
DELAND FL 32720
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

59-3124101

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BAUMGARTNER, ROGER B
101 N WOODLAND BLVD.
STE 600
DELAND FL 32720

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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, 2002 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 **S** ☐ Delete
NAME **SANDS, LARRY ESQ**
STREET ADDRESS **339 W. NEW YORK AVE.**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **P** ☐ Delete
NAME **DANNALS, GEORGE C**
STREET ADDRESS **624 N. ORANGE**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **D** ☐ Delete
NAME **HAYES, SHELDON W**
STREET ADDRESS **103 COUNTRY CLUB DR.**
CITY-ST-ZIP **DELAND FL 32724**

TITLE **T** ☐ Delete
NAME **BAUMSARTNER, ROGER B**
STREET ADDRESS **2300 PIN OAK DR**
CITY-ST-ZIP **DELAND FL 32720**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **P.O. Box 2010**
CITY-ST-ZIP **DAYTONA BEACH, Florida 32115**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **816 Liberty Court**
CITY-ST-ZIP **DeLand, Florida 32724**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **103 Country Club Dr.**
CITY-ST-ZIP **DeLand, Florida 32724**

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

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

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

CR2E034 (9/01)

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/8/02

386-734-1665