

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90040 047 ***150.00

DOCUMENT # V29877

1. Entity Name

ANCHORSHADE, INC.

Principal Place of Business

**1312 COMMERCE LANE
 SUITE 10A
 JUPITER FL 33458
 US**

Mailing Address

**1312 COMMERCE LANE
 SUITE 10A
 JUPITER FL 33458
 US**

839003



2. Principal Place of Business

8488 LEGEND CLUB DR.

3. Mailing Address

8488 LEGEND CLUB DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

WEST PALM BEACH, FL

City & State

WEST PALM BEACH, FL

4. FEI Number

22-6629246

Applied For

Not Applicable

Zip

33412

Country

USA

Zip

33412

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HALEY, BARRY L.

ONE E. BROWARD BLVD.

SUITE 1609

FT. LAUDERDALE FL 33301

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 **P** ☐ Delete
 NAME **HARRIS, NORMAN EARL**
 STREET ADDRESS **1312 COMMERCE LANE #10A**
 CITY-ST-ZIP **JUPITER FL**

TITLE **VP** ☐ Delete
 NAME **HARRIS, MARGARET ROSE**
 STREET ADDRESS **1312 COMMERCE LANE, #10A**
 CITY-ST-ZIP **JUPITER FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 **8488 LEGEND CLUB DR.**
 CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **8488 LEGEND CLUB DR.**
 CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

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TITLE ☐ Change ☐ 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:

MARGARET R. HARRIS
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02
 Date

561-691-4205
 Daytime Phone #

CR2E034 (9/01)