DOCUMENT #	465802
1. Entity Name	
JUSTICE CORPORATION	

Principal Place of Business

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1150 CLEVELAND STREET

SUITE 420 CLEARWATER FL 33755-4860

CLEARWATER FL 33755-4860 US 2. Principal Place of Business Mailing Address

1150 CLEVELAND STREET

SUITE 420

3. Mailing Address

CLEARWATER FL 33755-4860

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<u> 263</u>	O W. BAY DRIVE	P. O. BOY	330	)				
Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRITE I	N THIS SPACE		
Se I	leain Bluffs	City & State	4TeR	4.	FEI Number <b>59-1561565</b>		Applied For Not Applicable	
331°	TO PINELLAS	33757	Country U.S.1	5. (	Certificate of Status Desired	□ \$8.75 Fee Requ	Additional uired	
	6. Name and Address of Current Re	egistered Agent		71	Name and Address of New Regi	stered Agent		
				Name				
JUSTICE, ALBERT N			Stroot A	Street Address (P.O. Box Number is Not Acceptable)				
1150 CLEVELAND STREET			Girceit	SAME AS # 2				
SUITE 42	0					E		
CLEADMATED EL 20755 4000								
CLEARWAIEN FL 33/33-4000		City			FL Zip C	iode		
8. The above	named entity submits this statement for the	na nurnosa of changing its ro	unistated office o	r registered ag	ont or both in the State of Clasical			
SIGNATURE .	Allstertie					1.		
	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: R	Registered Agent signat	ure required when re	einstating)	DATE		
9. This corpo	pration is eigible to satisfy its Intangible	FILE NOW!!!	FEE IS \$150	00			,,,, <u>=</u> ,,	
	requirement and elects to do so.	After May 1, 2002			10. Election Campaign Finance	· _ ••	<b>5.00</b> May Be	
(See criter	ria on back)	Make Check Payable			Trust Fund Contribution.	☐ Add	ded to Fees	
11.	OFFICERS AND DI	BECTORS	12,	ΔD	I DITIONS/CHANGES TO OFFICE	DS AND DIDECT	OBC IN 11	
TITLE	PTD	☐ Delete	TITLE	PTD	BITIONS/GIANGES TO GITTOE			
NAME	JUSTICE, ALBERT N	Li Delete	NAME		$\Delta = \Delta \cdot 1 = A \cdot A$	<b>□</b> Chang	ge 🔲 Addition	
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CITY-ST-ZIP	CLEARWATER FL 33757	i	CITY-ST-ZIP					
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NAME	VSD	☐ Delete	TITLE	43.67	ice Judith I W. BAY DRIV.	<b>₹</b> Denang	ge 🗌 Addition	
STREET ADDRESS	JUSTICE, JUDITH B		NAME	2630	W. RAY DOW	- Suzi	אמו של	
CITY-ST-ZIP	P.O. BOX 1229		STREET ADDRESS					
	CLEARWATER FL 33757		CITY-ST-ZIP	12 4 11 G	BIR BLUFTS	<u>. 7. 3. 3. </u>	3770	
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NAME		55,5.5	NAME			L.J Ondrigo		
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
13. I hereby c	ertify that the information supplied with thi	s filing does not qualify for the	e examption state	ad in Section 1	10.07/9\/i) Florido Ctatut 1.5	la a a a a a a a a a a a a a a a a a a	- infa	

3. 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

4-27-02 1274415000

Daytime Phone #

CR2E034 (9/0