

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2003 8:00 am
Secretary of State

01-27-2003 90365 030 ***150.00

DOCUMENT # 539460

1. Entity Name
JOYCE ENTERPRISES, INC.



Principal Place of Business
**30700 US 19 N
LOT #2
PALM HARBOR FL 34684
US**

Mailing Address
**30700 US 19 N
LOT 2
PALM HARBOR FL 34684
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-1749166		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent

**STOCKTON, WENDELL
30700 U.S. 19 NORTH, LOT #2
LOT #2
PALM HARBOR FL 34684**

7. Name and Address of New Registered Agent

Name: **Joyce Stockton**
Street Address (P.O. Box Number is Not Acceptable): **30700 U.S. 19 N., Lot #2**
City: **Palm Harbor** FL Zip Code: **34684**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *X Joyce M. Stockton*
Signature, typed or printed name of registered agent and title if applicable.
JOYCE M. STOCKTON

(NOTE: Registered Agent signature required when restate)

DATE: **X 2-18-03**

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	V	☐ Delete
NAME	STOCKTON, WENDELL JR.	
STREET ADDRESS	35104 BUNKER HILL	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	S	☐ Delete
NAME	STOCKTON, EDWARD	
STREET ADDRESS	8082 POINT CYPRESS DR	
CITY-ST-ZIP	ORLANDO FL	
TITLE	P	☒ Delete
NAME	STOCKTON, WENDELL SR	
STREET ADDRESS	30700 US 19 N., LOT 2	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	T	☐ Delete
NAME	STOCKTON, JOYCE	
STREET ADDRESS	30700 US 19 N., LOT 2	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X Joyce M. Stockton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOYCE M. STOCKTON (TREASURER)

DATE: **X 2-21-03** 727-784-9296
Date Daytime Phone #

CR2E034 (10/02)