## 2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

## **DOCUMENT # 761954**

1. Entity Name

CITY-ST-ZIP

Jacksonville FL 32208

## OLD STANTON, INC.

Principal Place of Business

2323 COURTNEY DRIVE 2323 COURTNEY DRIVE JACKSONVILLE FL 32208-3065 JACKSONVILLE FL 33208 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2230026 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MITCHELL, ROBERT L. 2323 COURTNEY DRIVE JACKSONVILLE FL 32208 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME MITCHELL, ROBERT L. NAME STREET ADDRESS STREET ADDRESS 2323 COURTNEY DRIVE CITY-ST-ZIP CITY-ST-ZIP Jacksonville fl Change Addition ☐ Delete TITLE TITLE AIKENS, CHESTER A. NAME NAME STREET ADDRESS STREET ADDRESS 305 E. UNION STREET CITY-ST-ZIP CITY-ST-ZIP Jacksonville FL 32202 ☐ Delete Change Addition TITLE TITLE NAME SIMMONS, CHARLES E., JR NAME STREET ADDRESS STREET ADDRESS 1980 W EDGEWOOD AVENUE CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE FL ☐ Addition ☐ Change ☐ Delete TIT! F TITLE MCINTOSH, C.B. NAME NAME STREET ADDRESS 4063 RIBAULT RIVER LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE\_FL ☐ Change ☐ Addition Delete TITLE AUSTIN, RONALD R NAME STREET ADDRESS STREET ADDRESS 1400 PRUDENTIAL DRIVE SUITE 3 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32207 Addition ☐ Delete TITLE ☐ Change GIRARDEAU, ARNETT E NAME NAME STREET ADDRESS STREET ADDRESS **4215 RIBAULT RIVER LANE** 

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

May 31, 2000 8:00 am Secretary of State

05-31-2000 90077 029 \*\*\*\*70.00