

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F53201

1. Entity Name

JAYSON CONCEPTS, INC.

FILED
Feb 19, 2000 8:00 am
Secretary of State

02-19-2000 90026 010 ***150.00

Principal Place of Business

Mailing Address

115 VISTA BLVD
ARDEN NC 28704

115 VISTA BLVD
ARDEN NC 28704-9457
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 59-2131056

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PFAFFENBERGER, W J
631 US HIGHWAY ONE
SUITE 410
NORTH PALM BEACH FL 33408

Name
W. J. Pfaffenberger
Street Address (P.O. Box Number is Not Acceptable)
3 Golden Bear Plaza, Suite 300
11780 US #1
City North Palm Beach FL Zip Code 33408

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Delete
NAME	STINGEL, FREDERICK J.	
STREET ADDRESS	8 CEDAR CHINE	
CITY-ST-ZIP	ASHEVILLE NC	
TITLE	STD	☐ Delete
NAME	STINGEL, JANET	
STREET ADDRESS	8 CEDAR CHINE	
CITY-ST-ZIP	ASHEVILLE NC	
TITLE	VP	☐ Delete
NAME	STINGEL III, JOHN F.	
STREET ADDRESS	14 BENT OAK DRIVE	
CITY-ST-ZIP	ASHEVILLE NC	
TITLE	V	☐ Delete
NAME	STINGEL, JEFF W	
STREET ADDRESS	115 VISTA BLVD	
CITY-ST-ZIP	ARDEN NC	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Change ☐ Addition
NAME	Stingel, Frederick J	
STREET ADDRESS	21 Cedar Hill	
CITY-ST-ZIP	Asheville, North Carolina 28803	
TITLE	S/T/D	☐ Change ☐ Addition
NAME	Janet S. Stingel	
STREET ADDRESS	21 Cedar Hill	
CITY-ST-ZIP	Asheville, North Carolina 28803	
TITLE	VP/D	☐ Change ☐ Addition
NAME	Stingel, III, John	
STREET ADDRESS	614 Holt Lane	
CITY-ST-ZIP	Asheville, No. Carolina 28803	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janet S. stingel, Treasurer, February 3, 2000

Date

Daytime Phone #

CR2E034 (9/99)