

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90487 038 ***150.00

DOCUMENT # J30389 ✓
 1. Entity Name

JACK R. LOVING, P.A.

Principal Place of Business Mailing Address
 1300 Ponce de Leon Drive 1300 Ponce de Leon Drive
 Fort Lauderdale, Fl 33316 Fort Lauderdale, Fl 33316

A0032863

2. Principal Place of Business 3. Mailing Address
~~1323 Southeast Third Ave~~ ~~1323 Southeast Third Ave~~
 Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
 Ft. Lauderdale, Fl 33316 Ft. Lauderdale, Fl 33316
 Zip Country Zip Country

4. FEI Number Applied For
 59-2706857 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required.

6. Name and Address of Current Registered Agent
 LOVING, JACK R.
 1300 PONCE DE LEON DRIVE
 FORT LAUDERDALE, FL 33316

7. Name and Address of New Registered Agent
 Name
 LOVING, JACK R.
 Street Address (P.O. Box Number is Not Acceptable)
 1323 SOUTHEAST THIRD AVENUE
 City State Zip Code
 FORT LAUDERDALE FL 33316

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 JACK R. LOVING JACK R. LOVING 3.5.01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering.) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
(See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS

TITLE	PVS	<input type="checkbox"/> Delete
NAME	LOVING, JACK R.	
STREET ADDRESS	1300 PONCE DE LEON DR.	
CITY-ST-ZIP	FT. LAUDERDALE, FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LOVING, JACK R.	
STREET ADDRESS	1300 PONCE DE LEON DR.	
CITY-ST-ZIP	FT. LAUDERDALE	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVING, JACK R.	
STREET ADDRESS	1323 SOUTHEAST THIRD AVENUE	
CITY-ST-ZIP	FT. LAUDERDALE, FL	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVING, JACK R.	
STREET ADDRESS	1323 SOUTHEAST THIRD AVENUE	
CITY-ST-ZIP	FT. LAUDERDALE, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 JACK R. LOVING 3.5.01 954-764-1005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

JACK R. LOVING Pres.

CR2E034 (11/00)