

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90188 040 ***150.00

0495255 AV

DOCUMENT # P00000072879

1. Entity Name
J & N OF SPRING HILL, INC.

Principal Place of Business
**901 N HERCULES AVE STE D
 CLEARWATER FL 33765**

Mailing Address
**901 N HERCULES AVE STE D
 CLEARWATER FL 33765**



2. Principal Place of Business
3101 Commercial Way

3. Mailing Address
615 Clearwater-Largo Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Spring Hill, Florida

City & State
Largo, Florida

4. FEI Number
59-3662190

Applied For
 Not Applicable

Zip
34606 Country
USA

Zip
33770 Country
USA

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

~~KANTARAS, K=DEAN~~
**901 N HERCULES AVE STE D
 CLEARWATER FL 33765**

Name
John, Pappas

Street Address (P.O. Box Number is Not Acceptable)

615 Clearwater-Largo Road

City
Largo, FL FL Zip Code 33770

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]*

DATE
1/23/02

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, 2002 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PAPPAS, JOHN 901 N HERCULES AVE STE D CLEARWATER FL 33765 <input type="checkbox"/> Delete <i>615 Clearwater-Largo Rd Largo, FL 33770</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PAPPAS, NICK 901 N HERCULES AVE STE D CLEARWATER FL 33765 <input type="checkbox"/> Delete <i>615 Clearwater-Largo Rd Largo, FL 33770</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PAPPAS, PAPINA 901 N HERCULES AVE STE D CLEARWATER FL 33765 <input type="checkbox"/> Delete <i>615 Clearwater-Largo Rd Largo, FL 33770</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]*

DATE
1/23/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (9/01)