

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000078746

1. Entity Name
ST. BRENDAN'S ISLE, INC.

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90077 012 ***150.00

Principal Place of Business
501 W BAY ST
JACKSONVILLE FL 32202

Mailing Address
501 W BAY ST
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
411 Walnut Street
Suite, Apt. #, etc.

3. Mailing Address
411 Walnut Street
Suite, Apt. #, etc.

City & State
Green Cove Springs FL

City & State
Green Cove Springs FL

4. FEI Number
59-3665426

Zip
32043

Country
Clay

Zip
32043

Country
Clay

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

6. Name and Address of Current Registered Agent

JONES, RICHARD K
501 W BAY ST
JACKSONVILLE FL 32202

7. Name and Address of New Registered Agent

Name
Douglas W. Moody
Street Address (P.O. Box Number is Not Acceptable)
411 WALNUT STREET
City
Green Cove Springs FL Zip Code
32043

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 Douglas W. Moody Douglas W. Moody President 2/16/01
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, 2001 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
D
MOODY, LINDA K
2598 WINDWOOD LN
ORANGE PARK FL 32073 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MOODY, DOUGLAS W
2598 WINDWOOD LN
ORANGE PARK FL 32073 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: Douglas W. Moody Douglas W. Moody 2/16/01 904-284-1223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)