# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000101935

1. Entity Name
**FIRST AND SECOND JOHN INCORPORATED**

FILED
03 SEP 12 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Principal Place of Business | Mailing Address |
|---|---|
| 847 ORANGE AVENUE<br>SUITE A<br>DAYTONA BEACH, FL 32114 | 847 ORANGE AVENUE<br>SUITE A<br>DAYTONA BEACH, FL 32114 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number — 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 |
|---|---|
| LEE, REKITA B<br>317 JEFFERSON AVENUE<br>PORT ORANGE, FL 32127 | Name: Dianne Brown<br>Street Address (P.O. Box Number Is Not Acceptable): 1749 Arash Circle<br>City: Port Orange FL Zip Code: 32128 |

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Dianne J. Brown  Diane J. Brown  9/1/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW! FEE IS $160.00
After May 1, 2003 Fee will be $550.00
MAKE CHECK PAYABLE TO: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|
| TITLE | PD ☒ Delete | TITLE | President ☒ Change ☐ Addition |
| NAME | BROWN, JOHN A | NAME | John Archie Brown Jr. |
| STREET ADDRESS | 847 ORANGE AVENUE | STREET ADDRESS | 847 Orange Avenue |
| CITY-ST-ZIP | DAYTONA BEACH, FL 32114 | CITY-ST-ZIP | Daytona Beach, FL 32114 |
| TITLE | VPD ☒ Delete | TITLE | Vice President ☐ Change ☒ Addition |
| NAME | BROWN, JOHN A JR. | NAME | Michael Joseph Thomas Jr. |
| STREET ADDRESS | 847 ORANGE AVENUE | STREET ADDRESS | 847 Orange Avenue |
| CITY-ST-ZIP | DAYTONA BEACH, FL 32114 | CITY-ST-ZIP | Daytona Beach, FL 32114 |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | 200002302204 2 |
| STREET ADDRESS | | STREET ADDRESS | 09/12/03--01059--006 **558.75 |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

CR2E034 (10/02)

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** John Archie Brown Jr  John Archie Brown Jr  9/1/03  386-763-0303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daytona Phone #

p 9/15