

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000033170

1. Entity Name

JANSAM, INC.

Principal Place of Business

201 NORTHEAST 20TH STREET
OCALA FL 34470

Mailing Address

201 NORTHEAST 20TH STREET
OCALA FL 34470

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

59-3125440

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

FLANAGAN, GREGORY S
ONE NORTHEAST FIRST AVENUE
STE. 303
OCALA FL 34471

Name

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

City

FL

Zip Code

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAYHEW, LAWRENCE C
2300 NORTHEAST 32ND STREET
OCALA FL 34479

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change
Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAYHEW, JENNY S
2300 NORTHEAST 32ND STREET
OCALA FL 34479

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change
Addition

TITLE
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STREET ADDRESS
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JENNY S. MAYHEW 3/13/01 (352) 622-2571

Date

Daytime Phone #

CR2E034 (10/00)

0418643

Attachment

Dir. # ~~046000033170~~
539989

PLEASE USED ~~COULD~~ FEI Number

~~THE~~ 59-3125440. THIS Number's are not
OUR FEI Number

JANSAM, INC.

OUR Number IS. 59-3391460.

PLEASE CHANGE THIS.

THANK YOU.

Jerry S. Mayfield

DIXON'S MAYTAG LAUNDRY

201. N.E. 20TH St

OCCALA, FL

346070