

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90114 006 ***158.75

DOCUMENT # **P98000052477**

1. Entity Name
EQUITY CONCEPTS, INC.



Principal Place of Business
~~6000 PHILLIPS INDUSTRIAL BLVD~~
~~JACKSONVILLE FL 32256~~

Mailing Address
~~6000 PHILLIPS INDUSTRIAL BLVD~~
~~JACKSONVILLE FL 32256~~

New

2. Principal Place of Business
4206 Baymeadows Rd
Suite, Apt. #, etc.

3. Mailing Address
4206 Baymeadows Rd
Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES

City & State
Jacksonville, FL

City & State
Jacksonville, FL

4. FEI Number **65-0845751**

Applied For
Not Applicable

Zip **32217** Country **Duval**

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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

SPADAFORA, JEFFREY L
4206 Baymeadows Rd
JACKSONVILLE FL 32217

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

SIGNATURE *Jeff Spadafora*
Signature (hand or printed name of registered agent and title if applicable)

3/7/03
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
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 10

TITLE **PD** Delete
NAME **GOURTNEY, CALVERT N**
STREET ADDRESS **4900 MANATEE AVE. W., SUITE 101**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **President** Change Addition
NAME **Yarber, Vance A.**
STREET ADDRESS **21708 Hardy Oak, #100**
CITY-ST-ZIP **San Antonio, TX 78258**

TITLE **VP** Delete
NAME **SPADAFORA, JEFFREY L**
STREET ADDRESS **6000 PHILLIPS INDUSTRIAL BLVD**
CITY-ST-ZIP **JACKSONVILLE FL 32256**

TITLE **VP** Change Addition
NAME **Spadafora, Jeffrey L.**
STREET ADDRESS **4206 Baymeadows Rd**
CITY-ST-ZIP **Jacksonville, FL 32217**

TITLE **VP** Delete
NAME **DETIMAR, WAYNE R**
STREET ADDRESS **21708 HARDY OAK, #100**
CITY-ST-ZIP **SAN ANTONIO TX 78258**

TITLE **VP** Change Addition
NAME **Perez, William L**
STREET ADDRESS **4206 Baymeadows Rd**
CITY-ST-ZIP **Jacksonville, FL 32217**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Spadafora* **SIGNATURE REQUIRED**
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/03
Date

904-739-2722
Daytime Phone #

CR2E034 (10/02)