## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# V19527

City-St-Zip:

JACKSONVILLE, FL 32205

Entity Name: JOE W MANGE COMPANY

FILED Apr 18, 2003 Secretary of State

Littly Name: 30L W. WANGE COMPANT					
Current Principal Place of Business:				New Principal Place of Business:	
4579 LENC JACKSON	OX AVE VILLE, FL 322	05 US			
Current Mailing Address:				New Mailing Address:	
4579 LENOX AVE JACKSONVILLE, FL 32205 US				5207 MAGNOLIA OAKS LANE JACKSONVILLE, FL 32210 US	
FEI Number:	59-3109805	FEI Number Appli	ed For ( ) FEI Nu	mber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
FAIRCHILD, RONALD D. 701 FISK STREET SUITE 310 JACKSONVILLE, FL 32204 US				JOANN SARA MANGE 5207 MAGNOLIA OAKS LANE JACKSONVILLE, FL 32210 US	
The above in the State		submits this stater	nent for the purpose o	of changing its registered	d office or registered agent, or both,
SIGNATURE: JOANN SARA MANGE				04/18/2003	
Electronic Signature of Registered Agent					Date
	npaign Financing	g Trust Fund Contrib	ution ( ).	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PSTD () MANGE, JOSEF 4579 LENOX AV JACKSONVILLE	VE.		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	S () MANGE, JOANN 4579 LENOX AV JACKSONVILLE	VE.		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address:	DV () WIDDOSON, RA 4579 LENOX AV			Title: Name: Address:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOSEPH W MANGE JR PSTD 04/18/2003