

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90267 007 ***150.00

DOCUMENT # 228811

1. Entity Name
THE CHARLES SKINNER COMPANY

Principal Place of Business 2970 HARTLEY ROAD STE 302-A JACKSONVILLE FL 32210 US	Mailing Address 2970 HARTLEY ROAD STE 302-A JACKSONVILLE FL 32210 US
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2. Principal Place of Business 3121 Venture Place Suite, Apt. #, etc. Suite 3 City & State Jacksonville FL Zip 32257 Country USA	3. Mailing Address 3121 Venture Place Suite, Apt. #, etc. Suite 3 City & State Jacksonville FL Zip 32257 Country USA
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0879231	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SKINNER, CHARLES W 2970 HARTLEY ROAD STE 302-A JACKSONVILLE FL 32257	7. Name and Address of New Registered Agent Name SAME Street Address (P.O. Box Number is Not Acceptable) 3121 Venture Pl. #3 JACKSONVILLE, FL 32257 City FL Zip Code
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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 (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, 2002 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	PS SKINNER, CHARLES W. 2970 HARTLEY ROAD STE 302-A JACKSONVILLE FL 32257	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition 3121 Venture Place, Ste. 3 Jacksonville FL 32257
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 supplementary 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: (904) 886-7364
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)