

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State
 04-02-2001 90051 025 ***150.00

DOCUMENT # 386939

1. Entity Name
EXPEDIENT SERVICES, INC.

Principal Place of Business
2459 CHENEY HWY
TITUSVILLE FL 32780
US

Mailing Address
P.O. BOX 5400
TITUSVILLE FL 32783-5400

2. Principal Place of Business
605 Palm Avenue

3. Mailing Address

A Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Titusville, FL

City & State

Zip
32796

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **56-1018404**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HUGHES, SHERRY A.
4835 SANTA ROSA AVE
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name
Janice R. Hughes

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

5460 Sandra Drive

City
Titusville

FL

Zip Code
32780

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 *Janice R. Hughes*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/27/01

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
P
 NAME
HUGHES, HORACE
 STREET ADDRESS
4835 SANTA ROSA AVE
 CITY-ST-ZIP
TITUSVILLE FL

☐ Delete

TITLE
D
 NAME
Horace Hughes
 STREET ADDRESS
4835 Santa Rosa Ave, Titusville, FL

☒ Change ☐ Addition

TITLE
VD
 NAME
HUGHES, SHERRY
 STREET ADDRESS
4835 SANTA ROSA AVE
 CITY-ST-ZIP
TITUSVILLE FL

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
VD
 NAME
HUGHES, SANDRA
 STREET ADDRESS
1237 EAST LIVINGSTON
 CITY-ST-ZIP
ORLANDO FL

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
VD
 NAME
HUGHES, CARL
 STREET ADDRESS
5460 SANDRA DR
 CITY-ST-ZIP
TITUSVILLE FL

☐ Delete

TITLE
P
 NAME
Carl R. Hughes
 STREET ADDRESS
5460 Sandra Dr. Titusville, FL

☒ Change ☐ Addition

TITLE
VD
 NAME
HUGHES, GERALD
 STREET ADDRESS
4373 LONGBOW DR.
 CITY-ST-ZIP
TITUSVILLE FL

☐ Delete

TITLE
D
 NAME
Denise Hughes
 STREET ADDRESS
4373 Longbow Dr. Titusville, FL

☐ Change ☒ Addition

TITLE
STD
 NAME
HUGHES, JANICE
 STREET ADDRESS
5460 SANDRA DR
 CITY-ST-ZIP
TITUSVILLE FL

☐ Delete

TITLE
STV
 NAME
Janice R. Hughes
 STREET ADDRESS
5460 Sandra Dr. Titusville, FL

☒ 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: *Janice R. Hughes* Janice R. Hughes STV 3/27/01 321-267-3450
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)