

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 405104**

1. Entity Name

BIOMAGNETICS INTERNATIONAL, INC.

Principal Place of Business

**2301 PARK AVENUE
SUITE 102
ORANGE PARK FL 32073**

Mailing Address

**2301 PARK AVENUE
SUITE 102
ORANGE PARK FL 32073**

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

59-1459808

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

**RAWLS, WALTER D., JR.
2301 PARK AVENUE
SUITE 102
ORANGE PARK FL 32073**

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, 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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	SPT	RAWLS, WALTER C, JR (D)	2301 PARK AVENUE ORANGE PARK FL				
	D	SIMPSON, C.N.	2301 PARK AVE. ORANGE PARK FL				
	D	WALING, RONALD	2301 PARK AVENUE ORANGE PARK FL				
	V	RAWLS, RICHARD J.	2301 PARK AVE. ORANGE PARK FL				
	V	WINNEY, CHARLES F JR	2301 PARK AVE ORANGE PARK, FL.				
		KEVIN DALTON	2301 PARK AVE. D ORANGE PARK, FL.				

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

Date

Daytime Phone #

FILED
Jun 02, 2002 8:00 am
Secretary of State

05-17-2002 90008 041 ***158.75



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)

4-26-02 (904) 264-8564