

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 458608

1. Entity Name  
JOHN E. MCCAUSLAND, INC.

**FILED**  
**Feb 16, 2001 8:00 am**  
**Secretary of State**

02-16-2001 90030 039 \*\*\*150.00

Principal Place of Business  
P.O. BOX 3202  
JACKSONVILLE FL 32206-3202

Mailing Address  
P.O. BOX 3202  
JACKSONVILLE FL 32206-3202



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-1547406</b>		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
LEPRELL, SAMUEL L 901 BLACKSTONE BUILDING 233 E BAY ST JACKSONVILLE FL 32202				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. <input type="checkbox"/> (See criteria on back)		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	

11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PD	<input checked="" type="checkbox"/> Delete		TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MCGOUGH, LAWRENCE M			NAME	SCOTT A. BODKIN		
STREET ADDRESS	136 19TH AVE N			STREET ADDRESS	10983 PROSPECTOR DR		
CITY-ST-ZIP	JACKSONVILLE BCH FL			CITY-ST-ZIP	JACKSONVILLE, FL 32218		
TITLE	STD	<input checked="" type="checkbox"/> Delete		TITLE	VICE PRES	<input checked="" type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	PARNABY, GEORGE R., JR.			NAME	RICKY L. SEWIS		
STREET ADDRESS	6702 BEACH BLVD.			STREET ADDRESS	12414 ERIC AVE		
CITY-ST-ZIP	JACKSONVILLE FL 32216			CITY-ST-ZIP	JACKSONVILLE, FL 32218		
TITLE	VP	<input type="checkbox"/> Delete		TITLE	SECRETRES	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	BODKIN, SCOTT			NAME	NANCY E. DUNN		
STREET ADDRESS	10983 PROSPECTOR DR			STREET ADDRESS	1283-H BLANDING BLVD.		
CITY-ST-ZIP	JACKSONVILLE FL			CITY-ST-ZIP	ORANGE PK, FL 32065		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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: *Scott Bodkin* *Scott Bodkin* JAN 09, 01 904-358-1975  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)