

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 705875

FILED
Apr 16, 2002 8:00 AM
Secretary of State

Entity Name: FLORIDA JEWELERS ASSOCIATION, INC.

Current Principal Place of Business:

11812-A N. 56TH ST.
TAMPA, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

11812-A N 56TH ST.
TAMPA, FL 33617 US

New Mailing Address:

FEI Number: 59-1680789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STREEPER, MICHAEL W
11812-A N 56TH ST
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STACKS, MICHAEL
Address: 49 N ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: PD () Delete
Name: COOK, SHERYL
Address: 150 S. BEACH ST.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MD () Delete
Name: STREEPER, MICHAEL W
Address: 11812-A N 56TH ST.
City-St-Zip: TAMPA, FL 33617

Title: STD (X) Delete
Name: MATTHEWS, JOHN M
Address: 29 ROYAL PALM BEACH BOULEVARD
City-St-Zip: VERO BEACH, FL 329605207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COOK, SHERYL
Address: 150 S. BEACH ST.
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: STD (X) Change () Addition
Name: MATTHEWS, JOHN M
Address: 29 ROYAL PALM BEACH BLVD
City-St-Zip: VERO BEACH, FL 329605207 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL W. STREEPER

MD

04/16/2002

Electronic Signature of Signing Officer or Director

Date