

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

0013562

DOCUMENT # 735320

1. Entity Name

HERE'S LIFE, JACKSONVILLE, INC.

02-15-2001 90067 033 ****61.25

Principal Place of Business

Mailing Address

8421 BAYMEADOWS WAY
 #3
 JACKSONVILLE FL 32256-8223
 US

8421 BAYMEADOWS WAY
 #3
 JACKSONVILLE FL 32256-8223
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1707033

Applied For

Not Applicable

Zip

Country

Zip

Country

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

YOUNG, JIM
7693 LAS PALMAS WAY
JACKSONVILLE FL 32256

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

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
FREEMAN, HENRY ☐ Delete
4737 CARLISLE RD.
JACKSONVILLE FL 32210

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Change ☒ Addition
David Strathmann
11374 Tacito Creek Dr S
Jax FL 32223-1933

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Delete
YOUNG, JIM
7693 LAS PALMAS WAY
JACKSONVILLE FL 32256

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Change ☒ Addition
Ms. Nancy Ulrich
61 Fox Valley Dr.
Orange Park, FL 32073

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Delete
CRENSHAW, MACK
3855 ST. JOHNS AVENUE
JACKSONVILLE FL 32205

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Change ☒ Addition
Paul Cury
35 Ramona St.
Ponte Vedra, FL 32082-2820

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VCD ☐ Delete
BEEHNER, JOHN
2913 BERNICE DR
JACKSONVILLE FL 32257

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD ☐ Delete
PERRY, JOHN
2451 S PONTE VEDRA BLVD
PONTE VEDRA BCH FL 32082

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TO ☐ Delete
KLAHR, RICH
3704 SAN VISCAYA DR
JACKSONVILLE FL 32217

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-17-01 904-733-9452

CR2E037 (10/00)