## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 02, 2001 8:00 am Secretary of State **DOCUMENT # 842957** 1. Entity Name JORDAN, JONES & GOULDING, INC. 05-02-2001 90117 027 \*\*\*158.75 Principal Place of Business Mailing Address 2000 CLEARNIEN AVENUE, N.E. 6801GOVERANDES 2000 CLEARNIEW AVENUE, N.E. LAKE PKWY ATLANTA GA 38840 SAME ATLANTA GA 30340-3007 NORG ROBS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-0907412 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAAS, DENNIS A. Street Address (P.O. Box Number is Not Acceptable) BROWARD FINANCIAL CENTER, STE. 1850 500 EAST BROWARD BLVD. FT. LAUDERDALE FL 33394 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition CEO Change ☐ Delete TITLE TITLE ALLEN, DONALD R. NAME NAME STREET ADDRESS STREET ADDRESS 2000 CLEARVIEW AVE NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30340 ☐ Addition Change ☐ Delete TITLE TITLE GOULDING, RANDOLPH NAME NAME STREET ADDRESS STREET ADDRESS 2000 CLEARVIEW AVE NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30340 ☐ Addition TITLE -VDS ☐ Delete TITLE Change NAME CLAPK, EDWARD A NAME STREET ADDRESS STREET ADDRESS 2000 CLEARVIEW AVE NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30340 ☐ Change ☐ Addition TITLE ☐ Delete TITLE **BUTTON, CHARLES A** NAME NAME STREET ADDRESS STREET ADDRESS 2000 CLEARVIEW AVENUE CITY-ST-ZIP CITY-ST-7IP ATLANTA GA 30340 ☐ Delete TITLE ☐ Change ☐ Addition TITLE SEIBENHENER, ALBERT R NAME NAME STREET ADDRESS STREET ADDRESS 2000 CLEARVIEW AVE NE CITY-ST-7IP CITY-ST-ZIP ATLANTA GA 30340

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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF

□ Delete

☐ Change

Addition