2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F01000000044 **DOCUMENT #**

1. Entity Name



FILED Mar 17, 2003 8:00 am \$\frac{8}{2}\$

Secretary of State

03-17-2003 00071 010 75

03-17-2003 90071 048 ***150.00

| Zip Country Zip Country 5. Certificate of Status Desired \$8.75 A Fee Requ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TERHUNE, JOHN J 6811 PHILLIPS INDUSTRIAL BLVD JACKSONVILLE FL 32256 City FL Zip C 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. I am familiar with the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) PATE PILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 | |
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| Suite, Apt. #, etc. City & State Accountry Street Address of New Registered Agent TERHUNE, JOHN J 681 PHILLIPS INDUSTRIAL BLVD JACKSONVILLE FL 32256 City FL Zip C Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Terhune, John J Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Nu | |
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| Signature. In 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. I am familiar with the obligations of registered agent. Signature. File NOW!!! FEE IS \$150.00 | |
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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 instee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a faddress, with all other like improvered. LE LES

SIGNATURE:

NG OFFICER OR DIRECTOR