

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F58144

1. Entity Name
RICHARD C. PEPPER, JR., P.A.Principal Place of Business
3030 HARTLEY RD #150
JACKSONVILLE FL 32257

Mailing Address

3020 HARTLEY RD #350
JACKSONVILLE FL 32257

2. Principal Place of Business

8833 Perimeter Park Blvd.

3. Mailing Address

8833 Perimeter Park Blvd.

Suite, Apt. #, etc.

602

Suite, Apt. #, etc.

602

City & State
Jacksonville FL 32216City & State
Jacksonville FLZip
32216Country
USAZip
32216

Country

6. Name and Address of Current Registered Agent

PEPPER, RICHARD C., JR.
3030 HARTLEY RD #150
JACKSONVILLE FL 32257

Name-

Richard C. Pepper Jr.

Street Address (P.O. Box Number is Not Acceptable)

8833 Perimeter Park Blvd. Suite 602

Jacksonville FL

City
Jacksonville FLFL
Zip Code
32216

7. Name and Address of New Registered Agent

4. FEI Number
59-2141374

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

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

2-20-02

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PEPPER, RICHARD C., JR.
3030 HARTLEY RD #150
JACKSONVILLE FL Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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 Change AdditionTITLE
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STREET ADDRESS
CITY-ST-ZIP
 DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 Change Addition

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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #