

2001 UNIFORM BUSINESS REPORT (UBR)

0621189

DOCUMENT # F92000000786

1. Entity Name
JLM MARKETING, INC.

FILED

01 APR 24 AM 9:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
8675 HIDDEN RIVER PKWY.
TAMPA FL 33637
US

Mailing Address
8675 HIDDEN RIVER PKWY.
TAMPA FL 33637
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 06-1343718

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

STOLZBERG, MAXWELL
8675 HIDDEN RIVER PARKWAY
TAMPA FL 33637

Name NRAI SERVICES INC

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

526 E. PARK AVE-

City TALLAHASSEE FL Zip Code 32301

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 Ed Hand. Asst. Secretary 4-23-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME WALTER, TARPLEY
STREET ADDRESS 8675 HIDDEN RIVER PKWY.
CITY-ST-ZIP TAMPA FL 33637 ☐ Delete

TITLE VP CFO
NAME MICHAEL E. HAYES
STREET ADDRESS 8675 HIDDEN RIVER PKWY
CITY-ST-ZIP TAMPA, FL 33637 ☐ Change ☒ Addition

TITLE DVT
NAME MUSTO, FRANK A
STREET ADDRESS 8675 HIDDEN RIVER PKWY.
CITY-ST-ZIP TAMPA FL ☒ Delete

TITLE VP S+M
NAME JEFFREY L. ULBRICH
STREET ADDRESS 8675 HIDDEN RIVER PKWY
CITY-ST-ZIP TAMPA, FL 33637 ☐ Change ☒ Addition

TITLE DS
NAME MOLINA, MICHAEL J
STREET ADDRESS 8675 HIDDEN RIVER PKWY.
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE VP AS
NAME RICHARD T. DAWSON
STREET ADDRESS 8675 HIDDEN RIVER PKWY
CITY-ST-ZIP TAMPA, FL 33637 ☐ Change ☒ Addition

TITLE VM
NAME CROSKE, TONY D
STREET ADDRESS 8675 HIDDEN RIVER PARKWAY
CITY-ST-ZIP TAMPA FL 33637 ☒ Delete

TITLE VP DS
NAME LINDA SATO
STREET ADDRESS 8675 HIDDEN RIVER PKWY
CITY-ST-ZIP TAMPA, FL 33637 ☐ Change ☒ Addition

TITLE VS
NAME DUNN, JERRY A
STREET ADDRESS 8675 HIDDEN RIVER PARKWAY
CITY-ST-ZIP TAMPA FL 33637 ☒ Delete

TITLE 700004076857-0
NAME -04/25/01--01030--001
CITY-ST-ZIP *****450.00 *****150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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: *Michael J. Molina*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01 813 632 3300
Date Daytime Phone #

CR2E034 (10/00)