

2001 UNIFORM BUSINESS REPORT (UBR)

0521243

DOCUMENT # F92000000788

1. Entity Name
JLM INDUSTRIES, INC.

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

Zip

Country

Zip

Country

4. FEI Number 06-1163710

Applied For

Not Applicable

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 CP ☐ Delete
NAME MACDONALD, JOHN L
STREET ADDRESS 8675 HIDDEN RIVER PKWY.
CITY-ST-ZIP TAMPA FL

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

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

TITLE ☐ Change ☐ Addition
NAME 000004078870-1
STREET ADDRESS -04/25/01--01030--001
CITY-ST-ZIP *****450.00 *****150.00

TITLE ~~VPS~~ ☐ Delete
NAME MOLINA, MICHAEL J
STREET ADDRESS 8675 HIDDEN RIVER PKWY.
CITY-ST-ZIP TAMPA FL 33637

TITLE ☐ Change ☒ Addition
NAME VPFTAS
STREET ADDRESS MICHAEL J. MOLINA
CITY-ST-ZIP 8675 HIDDEN RIVER PKWY
TAMPA, FL 33637

TITLE VPT ☐ Delete
NAME SATO, LINDA
STREET ADDRESS 8675 HIDDEN RIVER PARKWAY
CITY-ST-ZIP TAMPA FL 33637

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

TITLE DVP ☐ Delete
NAME MACDONALD, SEAN D
STREET ADDRESS 8675 HIDDEN RIVER PARKWAY
CITY-ST-ZIP TAMPA FL 33637

TITLE ☐ Change ☒ Addition
NAME VP6SC
STREET ADDRESS RICHARD T. DAWSON
CITY-ST-ZIP 8675 HIDDEN RIVER PKWY
TAMPA, FL 33637

TITLE DV ☐ Delete
NAME TARPLEY, WALTER
STREET ADDRESS 8675 HIDDEN RIVER PARKWAY
CITY-ST-ZIP TAMPA FL 33637

TITLE ☐ Change ☐ Addition
NAME *[Signature]*
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01

813 632 3300

Date

Daytime Phone #

CR2E034 (10/00)