

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90102 020 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000006121
1. Entity Name
Young Services, Inc.

Principal Place of Business
PO Box 603
Piedmont, AL
36272
Mailing Address
PO Box 603
Piedmont, AL
36272

2. Principal Place of Business
Suite, Apt. #, etc.
3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip
Country

4. FEI Number
63-0811603
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
POWELL, RAPLH
4634 BRANNON AVE
JACKSONVILLE FL 32210

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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) Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State
10. Election Campaign Financing ☐ \$5.00
Trust Fund Contribution. May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	Delete
NAME	YOUNG, EZZIE C	
STREET ADDRESS	1521 SHADY GROVE ROAD	
CITY - ST - ZIP	PIEDMONT AL 36272	
TITLE	V	Delete
NAME	YOUNG, PAUL R	
STREET ADDRESS	164 WOODLAND CIRCLE	
CITY - ST - ZIP	PIEDMONT AL 36272	
TITLE	ST	Delete
NAME	YOUNG, TONY G	
STREET ADDRESS	1351 MISTLETOE RIDGE PLACE	
CITY - ST - ZIP	CONCORD, NC 28027	
TITLE		Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		Change	Addition
NAME			
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: EZZIE C. YOUNG Ezzie C. Young president 3/1/02 256-447-7673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

B0050431

DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)