

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002371

1. Entity Name

BEKINS MOVING SYSTEMS OF JACKSONVILLE, INC.

**FILED**  
**Mar 04, 2000 8:00 am**  
**Secretary of State**

03-04-2000 90121 050 \*\*\*150.00

Principal Place of Business

Mailing Address

6141 ARLINGTON EXPWY  
JACKSONVILLE FL 32211  
US

6141 ARLINGTON EXPWY  
JACKSONVILLE FL 32211-5600  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

7780-S Westside

7780-S Westside

State, Apt. #, etc.

State, Apt. #, etc.

Industrial Drive

Industrial Drive

City & State  
Jacksonville FL

City & State  
Jacksonville FL

Zip  
32219

Country  
USA

Zip  
32219

Country  
USA

4. FEI Number

36-4152356

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

ERIC LEACH, ESQ.

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

1660 PRUDENTIAL DRIVE, SUITE 200

City JACKSONVILLE

FL

Zip Code 32207

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

*Eric L. Leach*

2-23-00

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, 2000 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 PD  
NAME WEISS, MICHAEL ☐ Delete  
STREET ADDRESS 6141 ARLINGTON EXPWY  
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE PD ☒ Change ☐ Addition  
NAME WEISS, MICHAEL  
STREET ADDRESS 7780-S WESTSIDE INDUSTRIAL DRIVE  
CITY-ST-ZIP JACKSONVILLE, FL 32219

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
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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:

*Michael S. Weiss* MICHAEL S. WEISS

Date

Daytime Phone #

02/26/00 904721-1122

CR2E034 (9/99)