

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90173 036 ***150.00

DOCUMENT # F98000007082

1. Entity Name
WJLN HOLDINGS, INC.



Principal Place of Business
**2451 BRICKELL AVE., APT. 20A
MIAMI FL 33129**

Mailing Address
**2451 BRICKELL AVE., APT. 20A
MIAMI FL 33129**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**1508 China Grove Trail
Tallahassee, FL 32301-4972**

**1508 China Grove Trail
Tallahassee, FL 32301-4972**



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0884283**

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

**RYDER, WILLIAM
2451 BRICKELL AVE., APT. 20A
MIAMI FL 33129**

Name

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

**1508 China Grove Trail
Tallahassee, FL 32301-4972**

City

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

William Ryder **WILLIAM RYDER**

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CPT** ☐ Delete
NAME **RYDER, WILLIAM**
STREET ADDRESS **2451 BRICKELL AVE., APT. 20A**
CITY-ST-ZIP **MIAMI FL 33129**

TITLE **1508 China Grove Trail** ☐ Change ☒ Addition
NAME **Tallahassee, FL 32301-4972**

TITLE **DS** ☐ Delete
NAME **RYDER, JEANNE**
STREET ADDRESS **2451 BRICKELL AVE., APT. 20A**
CITY-ST-ZIP **MIAMI FL 33129**

TITLE **1508 China Grove Trail** ☐ Change ☒ Addition
NAME **Tallahassee, FL 32301-4972**

TITLE **D** ☐ Delete
NAME **RYDER, NEIL P**
STREET ADDRESS **1584 CHINA GROVE TR.**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

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

TITLE **D** ☐ Delete
NAME **RYDER, JEFF W DR.**
STREET ADDRESS **3285 SW WEMBLEY PARK RD**
CITY-ST-ZIP **PORTLAND OR 97034**

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

TITLE **D** ☐ Delete
NAME **RYDER, LISE A**
STREET ADDRESS **1512 CHINA GROVE TRAIL**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William Ryder **WILLIAM RYDER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/03
Date

850-657-2201
Daytime Phone #

CR2E034 (10/02)