2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G36870

City & State

Zip

SIGNATURE

11.

TITLE

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TITLE NAME

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STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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MAR-LIN OF JACKSONVILLE BEACH, INC.

Country

BUSCHMAN, ALBERT E., JR.

JACKSONVILLE BEACH FL 32250

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

BLUNK, CLYDE J

517 PATRICIA LANE

BLUNK, THOMAS W

517 PATRICIA LANE

JACKSONVILLE BEACH FL

JACKSONVILLE BEACH FL

2215 S 3RD ST SUITE 101

(See criteria on back)

DPS

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

Principal Place of Business	Mailing Address		
PATRICIA LANE	517 PATRICIA LANE JACKSONVILLE BEACH FL 32250-4759		
en e			
2. Principal Place of Business	3. Mailing Address		

City & State

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

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12.

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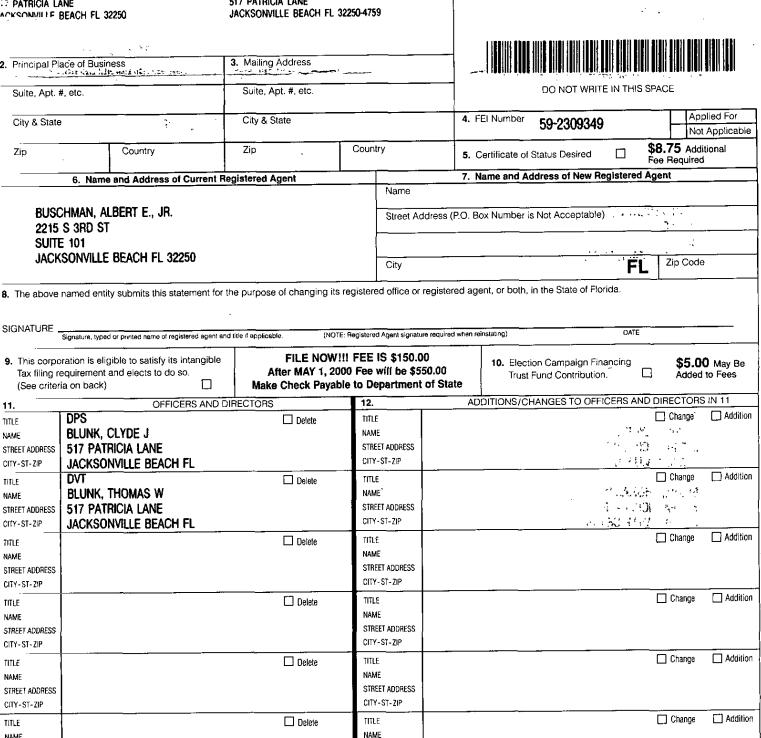
Name

City

Zip

FILED Apr 13, 2000 8:00 am Secretary of State

04-13-2000 90107 001 ***150 00



NAME		INMALE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP	·	CITY-ST-ZIP	
indicated of the co	d on this report or supplemental report in file and accurate and that my	signature shall h	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am an officer or director apter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Daytime Phone #