

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90231 004 ***158.75

DOCUMENT # G67691

1. Entity Name
JERRY BEDENBAUGH, INC.



Principal Place of Business
BRUNNER BUILDING SUPPLY
218 HWY 17 SOUTH
E PALATKA FL 32131

Mailing Address
PO BOX 248
218 HWY. 17. SOUTH
E PALATKA FL 32131
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 **59-2332811**

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

BEDENBAUGH, JERRY H
335 HORSEMAN CLUB ROAD
PALATKA FL 32177

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

SIGNATURE

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 **VP** ☐ Delete
NAME **BEDENBAUGH, TOBY F**
STREET ADDRESS **335 HORSEMAN CLUB RD**
CITY-ST-ZIP **PALATKA FL**

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

TITLE **ST** ☐ Delete
NAME **BEDENBAUGH, PAMELA G**
STREET ADDRESS **227 ROUND LAKE RD**
CITY-ST-ZIP **PALATKA FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **P**
STREET ADDRESS **JERRY H BEDENBAUGH**
CITY-ST-ZIP **335 HORSEMAN CLUB ROAD**
PALATKA, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **DIRECTOR**
STREET ADDRESS **JEFFREY A BEDENBAUGH**
CITY-ST-ZIP **227 ROUND LAKE ROAD**
PALATKA, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **DIRECTOR**
STREET ADDRESS **JED W BEDENBAUGH**
CITY-ST-ZIP **325 HORSEMAN CLUB ROAD**
PALATKA, FL

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-03

Date

386-328-2717

Daytime Phone #

CR2E034 (10/02)