

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90356 043 ***150.00

DOCUMENT # G72922

1. Entity Name
H AND J DEVELOPMENT COMPANY

Principal Place of Business

~~6251 PALM VISTA STREET~~
~~PORT ORANGE FL 32124~~

Mailing Address

~~6251 PALM VISTA STREET~~
~~PORT ORANGE FL 32124~~

2. Principal Place of Business

6998 Man O War Blvd

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 55127

Suite, Apt. #, etc.

City & State

Lexington, KY

City & State

Lexington, KY

4. FEI Number

59-2392206

Applied For

Not Applicable

Zip

40509

Country

Fayette

Zip

40555

Country

Fayette

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KEARN JAMES J.
138 LIVE OAK AVENUE
DAYTONA BEACH FL 32114

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.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DP
JUSTICE, PAUL S.
924 OETTER DR
S. DAYTONA FL

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VPS
JUSTICE, PAUL GREGORY
3376 WINCHESTER RD.
LEXINGTON KY

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VP
JUSTICE, STEPHEN K.
3384 WINCHESTER RD.
LEXINGTON KY

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VP
HURT, JEFF
6251 PALM VISTA STREET
PORT ORANGE FL

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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:

Paul S. Justice
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-2001
 Date

Daytime Phone #

0007398

CR2E034 (10/00)