

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H16036

1. Entity Name

EASTERN SKY INVESTMENTS, INC.

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90019 031 ***150.00

Principal Place of Business

836 EASTPORT ROAD
JACKSONVILLE FL 32218

Mailing Address

836 EASTPORT ROAD
JACKSONVILLE FL 32218-3918

2. Principal Place of Business

11258 Hwy S3 East
Suite, Apt. #, etc.

3. Mailing Address

11258 Hwy S3 East
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Marble Hill, GA

City & State

Marble Hill, GA

4. FEI Number

59-2463759

Applied For

Not Applicable

Zip

36148

Country

USA

Zip

36148

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEEKIN, T. GEOFFREY ESQ.
ONE INDEPENDENT DRIVE
SUITE 2200
JACKSONVILLE FL 32202

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, 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

TITLE S ☐ Delete
NAME KELLY, LINDA M.
STREET ADDRESS 2058 NEW BERLIN RD
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE P ☐ Delete
NAME KELLY, JAMES T.
STREET ADDRESS 2058 NEW BERLIN RD
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition
NAME Linda M. Kelly
STREET ADDRESS 11258 Hwy S3E.
CITY-ST-ZIP Marble Hill, GA 30148

TITLE Vice-Pres. ☒ Change ☐ Addition
NAME James T. Kelly
STREET ADDRESS 11258 Hwy S3E.
CITY-ST-ZIP Marble Hill, GA 30148

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Linda M. Kelly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-00
Date

770-893-1436
Daytime Phone #

CR2E034 (9/99)