FILED

4-20-2007

Daytime Phone #

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: A

Charles F. R

## Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # H21396** 1. Entity Name BACK JOY, INC. 4-27-2001 90240 005 \*\*\*150.00 Principal Place of Business Mailing Address 120 S DILLARD ST 114 S DILLARD ST WINTER GARDEN FL 34787 WINTER GARDEN FL 34787 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2449 195 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROPER, BERT E. Street Address (P.O. Box Number is Not Acceptable) 120 S. DILLARD STREET WINTER GARDEN FL 34787 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Delete Change Addition TITLE TITLE NAME NAME HALL, STACIA G STREET ADDRESS 120 S. DILLARD ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN FL 34787 ☐ Change Addition TITI F Delete TITLE NAME ROPER, CHARLES F. NAME STREET ADDRESS 120 S. DILLARD ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF WINTER GARDEN FL 34787 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROPER, BERT E. NAME STREET ADDRESS 120 S. DILLARD ST. STREET ADDRESS CITY-ST-ZIP WINTER GARDEN FL CITY-ST-ZIP TITLE X Delete TITLE □ Change Addition NAME HOEH, DAVID NAME STREET ADDRESS STREET ADDRESS 114 S DILLARD ST CITY-ST-ZIP CITY-ST-ZIF WINTER GARDEN FL 34787 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.