

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H39948

1. Entity Name

EDWIN E. BORDERS, JR., P.A.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90377 031 ***150.00

Principal Place of Business

Mailing Address

1816 PELICAN CT
NEPTUNE BEACH FL 32266
US

1816 PELICAN CT
NEPTUNE BEACH FL 32250-8509
US

2. Principal Place of Business

3. Mailing Address

1494 Blue Heron Ln E.

1494 Blue Heron Ln E

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jacksonville Bch, FL

City & State

Jacksonville Bch, FL

4. FEI Number

59-2484906

Applied For

Not Applicable

Zip

32250

Country

FL Duval

Zip

32250

Country

Duval

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

BORDERS, EDWIN E.

1816 PELICAN CT

NEPTUNE BEACH FL 32266

Name

Street Address (P.O. Box Number is Not Acceptable)

1494 Blue Heron Ln E.

City

Jacksonville Bch

FL

Zip Code

32250

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~DS~~ ☒ Delete
NAME BORDERS, NANCY
STREET ADDRESS 1816 PELICAN CT
CITY-ST-ZIP NEPTUNE BEACH FL

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

TITLE DP ☐ Delete
NAME BORDERS, EDWIN E., JR.
STREET ADDRESS 1816 PELICAN CT
CITY-ST-ZIP NEPTUNE BEACH FL

TITLE ☒ Change ☐ Addition
NAME 1494 Blue Heron Ln E.
STREET ADDRESS Jacksonville Bch, FL 32250
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

Edwin E. Borders Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00
Date

904 241 549
Daytime Phone #

CR2E034 (9/99)