

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90066 028 ***150.00

DOCUMENT # H40597
1. Entity Name
KELSEY INCORPORATED

Principal Place of Business
103 FLAGLER AVENUE
NEW SMYRNA BEACH FL 32169
Mailing Address
103 FLAGLER AVENUE
NEW SMYRNA BEACH FL 32169-2634

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
3. Mailing Address
Suite, Apt. #, etc.
City & State

4. FEI Number 59-2490697
Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
FOGLE, J. DANA
217 E. PLYMOUTH AVENUE
DELAND FL 32724

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

Table with 2 columns: OFFICERS AND DIRECTORS. Rows include James B. Kelsey (PD) and Christa Kelsey (STD) at 103 Flagler Avenue, New Smyrna Beach FL.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Includes checkboxes for Change and 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: Christa Kelsey
Date: 3/15/00
Daytime Phone #: 904-428-5258

CR2E034 (9/99)