

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90076 031 ***150.00

DOCUMENT # J43197

1. Entity Name
BS & RJ, INC.

Principal Place of Business

**3006 BAY TREE DR.
ORLANDO FL 32806
US**

Mailing Address

**3006 BAY TREE DR.
ORLANDO FL 32806
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2757069**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**DENNIS, JEANINE
3006 BAY TREE DR.
ORLANDO FL 32806**

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: **JEANINE DENNIS**

Signature, typed or printed name of registered agent and the filer (applicable)

Jeanine Dennis = Secretary

(NOTE: Registered Agent signature required when renewing)

DATE

4-5-01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, N 11

TITLE	D	☐ Delete
NAME	DENNIS, RICHARD O.	
STREET ADDRESS	3006 BAYTREE DR.	
CITY-STATE-ZIP	ORLANDO FL	
TITLE	DS	☐ Delete
NAME	DENNIS, LALAH JEANINE	
STREET ADDRESS	3006 BAYTREE DR.	
CITY-STATE-ZIP	ORLANDO FL	
TITLE	D	☐ Delete
NAME	EVANS, SHIRLEY J.	
STREET ADDRESS	3233 TINDALL ACRES ROAD	
CITY-STATE-ZIP	KISSIMEE FL	
TITLE	D	☐ Delete
NAME	EVANS, JOSEPH E.	
STREET ADDRESS	3233 TINDALL ACRES ROAD	
CITY-STATE-ZIP	KISSIMEE FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	D	☐ Change ☐ Addition
NAME	EVANS, SHIRLEY J.	
STREET ADDRESS	4670 PLEASANT RUN Rd.	
CITY-STATE-ZIP	BENTON, AR 72015	
TITLE	D	☐ Change ☐ Addition
NAME	EVANS, JOSEPH E.	
STREET ADDRESS	4670 PLEASANT RUN Rd.	
CITY-STATE-ZIP	BENTON, AR 72015	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: *Jeanine Dennis* **JEANINE DENNIS** **1-10-01** **407-898-6057**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Display to Filer
Secretary *Secretary*

CR2E034 (10/00)