2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # J65510 1. Entity Name J.D.'S RACK & DRAFT, INC.

FILED Feb 03, 2001 8:00 am Secretary of State

							02-03-20	01 90008 (J25 ***15	30.00	
Principal Place of Business Mailing Address											
% JAMES L. SPRADLIN 4431 SOUTHERN BOULEVARD WEST PALM BEACH FL 33406		% JAMES L. SPRADLIN 4431 SOUTHERN BOULEVARD WEST PALM BEACH FL 33406									
2. Principal F	Place of Business	3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State		City & State			4 . f	4. FEI Number 65-0034600				Applied For Not Applicable	
Zip	Country	Zip	Country	try 5. (Certificate of	Status Desire	d 🗆	\$8.75 A	dditional	1
	6. Name and Address of Current	Registered Agent	1		7. N	Name and A	ddress of Nev	w Registered			┨
				Name	***	-]
SPRADLIN, JAMES L. 4431 SOUTHERN BOULEVARD				Street Address (P.O. Box Number is Not Acceptable)							-
WES	T PALM BEACH FL 33406										1
				City				Fl	Zip Co	de	1
8. The above	named entity submits this statement for	or the purpose of changing its	s registered	office or regis	tered ag	ent, or both,	in the State of	f Florida.			1
	·										
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOT	FE: Registered A	gent signature requi	ired when re	einstating)		DATE			
9. This corpo	pration is eligible to satisfy its Intangible	FILE NOW	!!! FEE IS	\$150.00	_						1
Tax filing requirement and elects to do so.		After MAY 1, 2001 Fee will be \$550.00					on Campaign Fund Contribu	•	\$ 5. □	00 May Be ed to Fees	}
		Make Check Paya		artment of S							
TITLE	OFFICERS AND	DIRECTORS Delete	12.		AD	DITIONS/CH	HANGES TO C	OFFICERS AN	D DIRECTOR Change		ج إ
NAME	SPRADLIN, JAMES L	CT Delete	NAME						L. Grange		9
STREET ADDRESS	5802 MANGO ROAD			ADDRESS							3
CITY-ST-ZIP	WEST PALM BEACH FL		CITY-S1	-ZIP							1 5
TITLE NAME	ADAMS, DENNIS R.	☐ Delete	TITLE NAME	i					☐ Change	☐ Addition	5
STREET ADDRESS	747 SUNSET ROAD			ADDRESS							
CITY-ST-ZIP	WEST PALM BEACH FL		CITY-ST	I							
TITLE		☐ Delete	TITLE			-	**-		Change	Addition	1
NAME			NAME			•				4.56	
STREET ADDRESS CITY-ST-ZIP			STREET A	ADDRESS							
TITLE			-	-211							4
NAME		☐ Delete	TITLE NAME						☐ Change	☐ Addition	
STREET ADDRESS			STREET	ADDRESS							
CITY-ST-ZIP			CITY-ST	-ZIP							1
TITLE		☐ Delete	TITLE						☐ Change	☐ Addition	1
NAME	,		NAME								1
STREET ADDRESS			STREET /	ı							
CITY-ST-ZIP			CITY-ST	-417							4
TITLE NAME		☐ Delete	! TITLE NAME						☐ Change	☐ Addition	}
STREET ADDRESS			STREET A	ADDRESS							
CITY-ST-ZIP			CITY-ST								
13. hereby c	certify that the information supplied with	this filing does not qualify fo			Section 1	119.07(3)(i) F	Florida Statute	s. I further ce	rtify that the	information	1
indicated	certify that the information supplied with on this report or supplemental report is	true and accurate and that r	ny signature	shall have the	e same le	egal effect a	s if made unde	er oath; that I	am an office	r or director	