## 2002 Uniform Business Report (UBR)

## FILED Jul 28, 2002 8:00 am Secretary of State

(941) 485-3336

1. Entity Na	JMENT # J8242 ns II, south, Inc.	3		/		07-28-2002 S	11'y 01 5 90199 023 **	
Principal Place of Business		Mailing Address			$\dashv$			
1190 EAST VENICE AVE VENICE FL 34292 US		1190 EAST VENICE AVE VENICE FL 34292 US				1 1 <b>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </b>	IA BARIA BARIA BARIA RABA	######################################
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Slate		City & State		4.	FEI Number 59-2823463	<del></del>	Applied For	
Zip 	Country	Zip	Countr		5.	5. Certificate of Status Desired 58.75 Additional Fee Required		dditional red
	6. Name and Address of Current	Registered Agent	<u> </u>	Name	7.	Name and Address of New Regis		
BRITTON, RONALD T. 1190 EAST VENICE AVE VENICE FL 34292				Street Address (P.O. Box Number is Not Acceptable)				
L.,		City				FL Zip Co	de	
Tax filing	Signeture, typed or printed name of registered agent as constitution is eligible to satisfy its intangible requirement and elects to do so, cria on back)	FILE NOW! After May 1, 20 Make Check Payab	II FEE	will be \$550.00		10. Election Campaign Financia Trust Fund Contribution.		OO May Be d to Fees
11.	OFFICERS AND D		12.		AD	DITIONS/CHANGES TO OFFICER	S AND DIRECTOR	IS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRITTON, RONALD T 1190 EAST VENICE AVE VENICE FL	□ Delete	- 11 .				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRITTON, JONATHAN M 1190 EAST VENICE AVE VENICE FL	O elete .	II.		,		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	,,	T ADORESS ,			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE CITY-S	T ADORESS			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleis	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP			☐ Change	Addition
TITLE Name Street adoress City-St-Zip		☐ Delate	TITLE NAME STREET CITY-S	ADDRESS T-21P			☐ Change	Addition
of the corr	certify that the information supplied with the on this report or supplemental report is treporation or the receiver or trustee empower or on an attachment with appladdress, with	Bred to execute this report a	the exem y signatu is require	ption stated in Se re shall have the d by Chapter 607	ection 1 same le 7, Florid	19.07(3)(i), Florida Statutes. I furthe egal effect as if made under oath; th la Statutes; and that my name appe	er certify that the in nat I am an officer pars in Block 11 or	formation or director Block 12 if

TODD BRITTON, OWNER 3/27/02



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July 25, 2002

Division of Corporations P. O. Box 1500

Tallahassee, Flor-ida 32302-1500

Reference

J82423, and P01000036858

Britton's TI South, and

Britton's Iv

Please be advised, we received the report form and returned checks for the above reference numbers, stating the checks were made out to the wrong department.

We apologize for the lateness, but the information was forwarded to the wrong person in another department which just recently came to my attention.

If you need additional informations or have questions, please contact me at (941) 485-3336.

Respectfully

Cheri Lane, Office Manager

Encl. 2