FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90043 046 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J92323

1. Entity Name
Sunco Enterprises of Jax Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5201 Riverton Rd	Same
Suite, Apt. #, etc. /	Suite, Apt. #, etc. /
City & State Jacksonville FL	City & State FL.
Zip 32277 Country USA	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2850058 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Pamela J. Kemp

Street Address (P.O. Box Number is Not Acceptable) 5201 Riverton Rd

City Jacksonville FL Zip Code 32277

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1st - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE Pres.	Pamela J. Kemp
STREET ADDRESS	5201 Riverton Rd
CITY-ST-ZIP	Jax FL 32277
TITLE V/P	Paul A. Kemp
STREET ADDRESS	12710 Meadowsweet Lane
CITY-ST-ZIP	Jax FL 32225
TITLE Sec/Treas	Michael S Kemp
STREET ADDRESS	623 Trumpet Vine Ct
CITY-ST-ZIP	Jax FL 32277
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Pamela J Kemp 4/29/02 904-744-7035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #