FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2002 8:00 am
Secretary of State
05-17-2002 90043 041 ***150.00

DOCUMENT # L08521

1. Entity Name

JEAN"S RIVER HOUSE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2137 Astor Street	2137 Astor Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orange Park, FL	City & State: Orange Park, FL
Zip: 32073 Country: USA	Zip: 32073 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-2290265 ☐ 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: Jean Patterson

Street Address (P.O. Box Number is Not Acceptable): 2137 Astor Street

City: Jacksonville FL Zip Code: 32073

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) ☑

January 1 - 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	DPVST
NAME	Jean Patterson
STREET ADDRESS	2137 Astor Street
CITY-ST-ZIP	Orange Park, FL 32073
TITLE	D
NAME	William Patterson
STREET ADDRESS	2137 Astor Street
CITY-ST-ZIP	Orange Park, FL 32073
TITLE	DM
NAME	Connie Vazquez
STREET ADDRESS	2137 Astor Street
CITY-ST-ZIP	Orange Park, FL 32073.
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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: Latey B. Swanson CPA 4/29/2002 904-389-4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

for Jean Patterson