

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L31707

1. Entity Name

HOME LOCATORS, INC.

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90080 041 ***150.00

Principal Place of Business

11606 COLUMBIA PK DR E
104
JAX FL 32258
US

Mailing Address

11606 COLUMBIA PK DR E
104
JAX FL 32258-1744
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2978652

Applied For

Not Applicable

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

SAFER, ELIOT J.
3974 WOODCOCK DR, STE 100
JACKSONVILLE FL 32207

Name

SAFER, ELIOT J.

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

4925 BEACH BLVD.

City

JACKSONVILLE

FL

Zip Code
32207

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 ELIOT J. SAFER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

APRIL 5, 2000

DATE

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, 2000 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 IN 11

TITLE **PD** ☐ Delete
NAME **VANLANDINGHAM, JAMES C**
STREET ADDRESS **318 B 8TH ST**
CITY-ST-ZIP **ATLANTIC BCH FL**

TITLE **VICE PRESIDENT** ☐ Change ☒ Addition
NAME **VANLANDINGHAM, JAMES, C. SR.**
STREET ADDRESS **7601 HOLLYRIDGE CIRCLE**
CITY-ST-ZIP **JACKSONVILLE, FLORIDA 32256**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **VANLANDINGHAM JAMES C. JR.**
STREET ADDRESS **2138 SWEETBRIAR LANE**
CITY-ST-ZIP **JACKSONVILLE, FLORIDA 32217**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: JAMES C. VANLANDINGHAM JR. **JAMES C. VANLANDINGHAM JR. APRIL 5, 2000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(904) 288-8555

CR2E034 (9/99)