

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L36313

1. Entity Name

J. WILLIAM REEVES COMPANY, INC.

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90087 010 ***150.00

Principal Place of Business

Mailing Address

307 E LAKESHORE DR
TALLAHASSEE FL 32312
US

307 E LAKESHORE DR
TALLAHASSEE FL 32312
US

2. Principal Place of Business

219 Westwood Drive

3. Mailing Address

219 Westwood Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

Tallahassee FL

Zip

32304

Country

Leon

Zip

32304

Country

Leon

4. FEI Number

59-2980045

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VALENTINE, STEVEN S.
307 E LAKESHORE DR
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name

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

219 Westwood Drive

City

Tallahassee FL

FL

Zip Code

32304

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

Steven S. Valentine - president

(NOTE: Registered Agent signature required when reinstating)

4/30/2001

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, 2001 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

TITLE: PDT
NAME: VALENTINE, STEVEN SMITH
STREET ADDRESS: 307 E LAKESHORE DR
CITY-ST-ZIP: TALL FL

☐ Delete

TITLE: VD
NAME: ORD, NELL R.
STREET ADDRESS: 3240 W. WESTMONTE DRIVE
CITY-ST-ZIP: FALLBROOK CA

☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:
NAME:
STREET ADDRESS: 219 Westwood Drive
CITY-ST-ZIP: Tallahassee FL 32304

☒ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS: 138 Lillian Way
CITY-ST-ZIP: Fallbrook, CA 92028

☒ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Steven S. Valentine

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2001

Date

(850)386-1880

Daytime Phone #

CR2E034 (10/00)