

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91385 046 ***150.00

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DOCUMENT # M91599

1. Entity Name
HJK PUBLICATIONS, INC.

Principal Place of Business
366 E GRAVES AVE
SUITE D
ORANGE CITY FL 32763
US

Mailing Address
366 E GRAVES AVE
SUITE D
ORANGE CITY FL 32763
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2919758**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROSENBERG, RICHARD A.
227 SOUTH VOLUSIA AVE
ORANGE CITY FL 32763

Name **Jon T. Hutchinson**

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

366 E. Graves Ave Ste D

City **Orange City**

FL

Zip Code **32763**

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.

X SIGNATURE **JON T. HUTCHINSON**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Jon T. Hutchinson

20 Mar 02

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, 2002 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 **P** ☐ Delete
 NAME **HUTCHINSON, JOHN**
 STREET ADDRESS **1018 ROSETTA DR**
 CITY-ST-ZIP **DELTONA FL**

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

TITLE **V** ☐ Delete
 NAME **KARCHER,**
 STREET ADDRESS **1018 ROSETTA DR**
 CITY-ST-ZIP **DELTONA FL 32725**

TITLE ☒ Change ☐ Addition
 NAME **Karcher, Janet**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **HUTCHINSON, JOHN T**
 STREET ADDRESS **1018 ROSETTA DR**
 CITY-ST-ZIP **DELTONA FL**

TITLE ☒ Change ☐ Addition
 NAME **Hutchinson, Jon T**
 STREET ADDRESS **216 S. Blue Lake Ave**
 CITY-ST-ZIP **Deland FL 32724**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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)(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:

Janet Karcher **Janet Karcher**

3/20/02

386-774-8881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)