

**FILED**  
**Apr 07, 2002 8:00 am**  
**Secretary of State**

03-12-2002 90266 013 \*\*\*150.00

# 2002 UNIFORM BUSINESS REPORT (UBR)

|   |   |   |   |
|---|---|---|---|
| <b>DOCUMENT # M96065</b>  |   |   |   |
| 1. Entity Name<br>J.A. BAKER, INC.  |   |   |   |
| Principal Place of Business<br>4040 OLD DIXIE HWY<br>VALKARIA FL 32950<br>US  |   | Mailing Address<br>P.O. BOX 441<br>GRANT FL 32749-0441<br>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<br>59-2912673   |   | Applied For<br><input type="checkbox"/> Not Applicable  |   |
| 5. Certificate of Status Desired <input type="checkbox"/>   |   | \$8.75 Additional Fee Required  |   |
| 6. Name and Address of Current Registered Agent   |   | 7. Name and Address of New Registered Agent   |   |
| KELLNER, JUNE<br>450 BIRCH AVENUE, SW<br>PALM BAY FL 32908  |   | Name <u>Kellner, June</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>198 Driskell St. NE</u><br>City <u>Palm Bay</u> <u>FL</u> Zip Code <u>32907</u> |   |
| 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 <u>June Kellner</u> <u>June Kellner</u> <u>3-28-02</u><br>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. <input type="checkbox"/><br>(See criteria on back)  |   | FILE NOW!!! FEE IS \$150.00<br>After May 1, 2002 Fee will be \$550.00<br>Make Check Payable to Department of State  |   |
| 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>   |   | \$5.00 May Be Added to Fees   |   |
| 11. OFFICERS AND DIRECTORS  |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | PD<br>KELLNER, JUNE<br>450 BIRCH AVENUE, SW<br>PALM BAY FL 32908 <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | STD<br>KELLNER, PAUL<br>450 BIRCH AVENUE, SW<br>PALM BAY FL 32908 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> 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: <u>June Kellner</u>  |   | 3-28-02   |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |   | Date Daytime Phone #  |   |

June Kellner, President

CR2E034 (9/01)