

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 21, 2003 8:00 am
Secretary of State

07-21-2003 90132 043 *****61.25

DOCUMENT # N02000005029

1. Entity Name

MARRIAGE FOR LIFE, INC.



Principal Place of Business

**10005 GATE PKWY. NORTH
JACKSONVILLE FL 32246**

Mailing Address

**10005 GATE PKWY. NORTH
JACKSONVILLE FL 32246**

2. Principal Place of Business

3844 Burnett Park Rd.

Suite, Apt. #, etc.

3. Mailing Address

3844 Burnett Park Rd.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State Jacksonville FL		City & State Jacksonville FL		4. FEI Number 56-2283483	Applied For ☐
Zip 32257	Country USA	Zip 32257	Country USA	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SMITH, C. HOLT III
233 EAST BAY ST., STE. 930
JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLOCH, DONALD 13761 NIGHT HAWK CT. JACKSONVILLE FL 32224	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARKS, RICHARD 886 PALERMO RD. JACKSONVILLE FL 32216	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BLOCH, ANNE 13761 NIGHT HAWK CT. JACKSONVILLE FL 32224	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BASS, GEORGE 3838 COLEBROOKE DR. JACKSONVILLE FL 32210	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Richard Marks 886 Palermo Rd Jacksonville, FL 32216	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Larry Lowery 11087 Barbizon Circle West Jacksonville, FL 32257	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Granville Reed 841 Franklin St. Jacksonville, FL 32206	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Derick Sharron 12616 Briarmeade Lane Jacksonville, FL 32258	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-17-03

904-366-1237

CR2E037 (4/03)