

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000007581

FILED  
Apr 25, 2003  
Secretary of State

Entity Name: LEE BULLS ATHLETIC CLUB INC.

## Current Principal Place of Business:

313 E 10 ST  
JACKSONVILLE, FL 32206

## New Principal Place of Business:

## Current Mailing Address:

313 E 10 ST  
JACKSONVILLE, FL 32206

## New Mailing Address:

P.O. BOX 3664  
JACKSONVILLE, FL 32206

FEI Number: 13-4212841

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, DAVID L  
313 E 10 ST  
JACKSONVILLE, FL 32206

## Name and Address of New Registered Agent:

JONES, DAVID L  
333 LAURINA STREET  
111  
JACKSONVILLE, FL 32206

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:

04/25/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JONES, DAVID L  
Address: P.O. BOX 13193  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: MCNAIR, ANTONIO  
Address: 1131 FLORIDA AVE  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: NEAVINS, TONYA  
Address: 7374 JOHN F KENNEDY DR  
City-St-Zip: JACKSONVILLE, FL 32219

Title: D ( ) Delete  
Name: JOHNSON, KARENA  
Address: P.O. BOX 3664  
City-St-Zip: JACKSONVILLE, FL 32206

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID L. JONES

DIR

04/25/2003

Electronic Signature of Signing Officer or Director

Date