

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37572

1. Entity Name

BARTRAM CAMPUS/BOLLES, INC.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90125 049 ****61.25

Principal Place of Business

Mailing Address

% HARRY M DEMONTMOLLIN
7400 SAN JOSE BLVD
JACKSONVILLE FL 32217

% HARRY M DEMONTMOLLIN
7400 SAN JOSE BLVD
JACKSONVILLE FL 32217-3430

00012002



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

59-0624365

Applied For

Not Applied

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

DEMONTMOLLIN, HARRY, M
7400 SAN JOSE BLVD
JACKSONVILLE FL 32217

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME CPT
STREET ADDRESS DEMONTMOLLIN, HARRY, M
CITY-ST-ZIP 7400 SAN JOSE BLVD
JACKSONVILLE FL 32217

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

TITLE ☐ Delete
NAME D
STREET ADDRESS STOPYRA, EDWARD, J
CITY-ST-ZIP 7400 SAN JOSE BLVD
JACKSONVILLE FL 32217

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

TITLE ☐ Delete
NAME D
STREET ADDRESS BORG, F. W
CITY-ST-ZIP 7400 SAN JOSE BOULEVARD
JACKSONVILLE FL 32217

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

TITLE ☐ Delete
NAME D
STREET ADDRESS HARTLEY, RUTH, M
CITY-ST-ZIP 7400 SAN JOSE BLVD
JACKSONVILLE FL 32217

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

TITLE ☐ Delete
NAME VS
STREET ADDRESS RICHARD T. ANDERSON
CITY-ST-ZIP 2264 BARTRAM ROAD
JACKSONVILLE FL 32207

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 REQUIRED

1/10/00

904-733-9292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #