

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000844

1. Entity Name

ORTEGA PRESERVATION SOCIETY, INC.

Principal Place of Business

Mailing Address

P.O. BOX 46
ORTEGA STATION
JACKSONVILLE FL 32210

P.O. BOX 46
ORTEGA STATION
JACKSONVILLE FL 32210

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3307232

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

HARDIN, RICHARD D
2822 CHEROKEE AVE.
JACKSONVILLE FL 32210

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 DP
NAME HARDIN, RICHARD D
STREET ADDRESS PO BOX 74 ORTEGA STATION
CITY-ST-ZIP JACKSONVILLE FL 32210 ☐ Delete

TITLE DIRECTOR
NAME HOLIFIELD, MIKE
STREET ADDRESS 4157 TIMUGUANA RD
CITY-ST-ZIP JACKSONVILLE, FL 32210 ☐ Change ☒ Addition

TITLE DS
NAME HOLIFIELD, LEE
STREET ADDRESS 4157 TIMUGUANA RD
CITY-ST-ZIP JACKSONVILLE FL 32210 ☐ Delete

TITLE DIRECTOR
NAME CHURCH, HAROLD
STREET ADDRESS 4362 FOREST PARK RD
CITY-ST-ZIP JACKSONVILLE, FL 32210 ☐ Change ☒ Addition

TITLE D
NAME CHISHOLM, CAL
STREET ADDRESS 4252 BALTIC CIRCLE
CITY-ST-ZIP JACKSONVILLE FL 32210 ☐ Delete

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

TITLE DT
NAME HARDIN, CHERYL
STREET ADDRESS PO BOX 74 ORTEGA STATION
CITY-ST-ZIP JACKSONVILLE FL 32210 ☐ Delete

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

TITLE D
NAME HUGHES, LANE
STREET ADDRESS 2832 CHEROKEE AVE
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

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

TITLE D
NAME ESTES, STEVEN
STREET ADDRESS 4740 APACHE AVE
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

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:

Richard D. Hardin, President

1-7-02 (904) 389-9414

FILED
Jan 09, 2002 8:00 am
Secretary of State

01-09-2002 90002 039 ****61.25



DO NOT WRITE IN THIS SPACE

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