

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90037 038 ****70.00

DOCUMENT # N95000003261

1. Entity Name

PABLO RENEWAL IN DUVAL EAST CORPORATION

Principal Place of Business

Mailing Address

COMMUNITY ASSISTED POLICING
 740 SOUTH 4TH AVENUE
 JACKSONVILLE BEACH FL 32250

3948 SOUTH 3RD STREET
 #114
 JACKSONVILLE BEACH FL 32250-5847

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

59-3332908

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLUE, CLIFFORD
 101 SO. PENMAN ROAD
 JACKSONVILLE BEACH FL 32250

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	<input checked="" type="checkbox"/> Delete
NAME	FRINKS, BRENDA	
STREET ADDRESS	446 SOUTH 6TH AVE	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HOLLOWAY, MARJORIE T	
STREET ADDRESS	824 FIRST AVENUE SOUTH	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	DV	<input type="checkbox"/> Delete
NAME	DAVIS, JOSEPH JR	
STREET ADDRESS	869 BONITA RD	
CITY-ST-ZIP	ATLANTIC BEACH FL 32233	
TITLE	D	<input type="checkbox"/> Delete
NAME	PALMER, LEWIS	
STREET ADDRESS	6266 BARRY DR WEST	
CITY-ST-ZIP	JACKSONVILLE FL 32208	
TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	ROBINSON, THEODORE	
STREET ADDRESS	8090 ATLANTIC BLVD A96	
CITY-ST-ZIP	JACKSONVILLE FL 32211	
TITLE		<input checked="" type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MAXINE BRYANT	
STREET ADDRESS	204 9th STREET South	
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250	
TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIANE JOHNSON	
STREET ADDRESS	614 3rd AVE S.	
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRENDA FRINKS	
STREET ADDRESS	446 SOUTH 6th AVE	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANNA CALHOUN	
STREET ADDRESS	725 3RD AVE South	
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JESSIE B. GATES	
STREET ADDRESS	623 5th AVE South	
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *MAXINE BRYANT*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-00
 Date

(904)241-3920
 Daytime Phone #

CR2E037 (9/99)