

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

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90437 039 ****61.25

DOCUMENT # N95000005572

1. Entity Name

BOSOM BUDDIES OF JACKSONVILLE, INC.



Principal Place of Business

**1335 WOODWARD AVE
JACKSONVILLE FL 32207
US**

Mailing Address

**1335 WOODWARD AVE
JACKSONVILLE FL 32207
US**

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 **59-3192977**

Applied For

Not Applicable

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

**DE CORDOVA-HANKS, BOBBI
1335 WOODWARD AVE
JACKSONVILLE FL 32207**

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	T	SAMUELS, PAM	4831-1 GREENLAND RD JACKSONVILLE FL 32258	<input type="checkbox"/> Delete			
	S	THOMPSON, TERRY	7027 FT. CAROLINE HILLS DR. JACKSONVILLE FL 32277	<input type="checkbox"/> Delete			
	D	WALKER, YUBA	3933 VALLEY GARDEN DR., W JACKSONVILLE FL 32225	<input type="checkbox"/> Delete			
	D	COSCIA, JENNIFER	12003 SAVERIO LN JACKSONVILLE FL 32225	<input type="checkbox"/> Delete			
	P	MURRAY, BRENDA	11746 SPARKLEBERRY RD. JACKSONVILLE FL 32223	<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

Director
Yuba Walker-Boateng
4252 Bleinheim Place
Jacksonville, FL 32225

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ 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: **Bobbi de Cordova-Hanks** 1-8-03 904/398-5379

CR2E037 (10/02)