

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002096

1. Entity Name

WELL DONE SERVANT INC.

Principal Place of Business

3638 MANOR OAKS DRIVE
JACKSONVILLE FL 32277

Mailing Address

3638 MANOR OAKS DRIVE
JACKSONVILLE FL 32277

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

59-3640567

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

0001584

FILED
Sep 10, 2001 8:00 am
Secretary of State

09-10-2001 90056 041 ****61.25

6. Name and Address of Current Registered Agent

GOSNELL, WELDON H
3638 MANOR OAKS DRIVE
JACKSONVILLE FL 32277

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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
After September 12, 2001, min. will be \$236.25

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

TITLE P
NAME GOSNELL, WELDON H
STREET ADDRESS 3638 MANOR OAKS DR
CITY-ST-ZIP JACKSONVILLE FL 32277 ☐ Delete

TITLE ST
NAME GOSNELL, BETTY
STREET ADDRESS 3638 MANOR OAKS DR
CITY-ST-ZIP JACKSONVILLE FL 32277 ☐ Delete

TITLE D
NAME GOSNELL, CRAIG W
STREET ADDRESS 2579 BAHIA RD
CITY-ST-ZIP WEST PALM BEACH FL 33406 ☐ Delete

TITLE D
NAME BOSNELL, MARK B
STREET ADDRESS 416 BOTTESFORD DR
CITY-ST-ZIP KENNESAW GA 30144 ☐ Delete

TITLE D
NAME GOSNELL, STEPHEN H
STREET ADDRESS 285 PINE ISLAND RD
CITY-ST-ZIP MERRITT ISLAND FL 32953 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME D GOSNELL, CRAIG W
STREET ADDRESS 3638 MANOR OAKS DR
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME D
STREET ADDRESS 5365 COUNTRY LAKE
CITY-ST-ZIP MERRITT ISLAND, FL 32953

TITLE ☐ Change ☐ 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:

WELDON H GOSNELL

Sep 3, 2001 904-743-5619

CR2E037 (5/01)