

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90102 025 \*\*\*\*61.25

**DOCUMENT # N99000005767**

1. Entity Name

**DOWN SOUTH PRODUCTIONS, INC.**

Principal Place of Business

Mailing Address

**3228 LAUREL STREET  
 GULF BREEZE FL 32561**

**3228 LAUREL STREET  
 GULF BREEZE FL 32561**

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

**59-3622390**

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

**WEAVER, PATRICIA  
 3228 LAUREL STREET  
 GULF BREEZE FL 32561**

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

**After September 13, 2002,  
 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	C	MCNICKLE, CHRIS	WILSON AVE THOMASVILLE AL 36784	<input type="checkbox"/> Delete			
	D	HALL, STUART	2080 THORN CLIFF TRACE CUMMING GA 30040	<input type="checkbox"/> Delete			
	D	GILLETTE, DAVID	8808 UNIVERSITY PKWY PENSACOLA FL 32514	<input type="checkbox"/> Delete			
	D	WILSON, PHIL	31331 OAKRIDGE DR. SPANISH FORT AL 36527	<input type="checkbox"/> Delete			
	D	DEMPSEY, MAX L	904 ELLEN ST. SARALAND AL 36571	<input type="checkbox"/> Delete			
	D	WEAVER, JASON	3228 LAUREL STREET GULF BREEZE FL 32561	<input type="checkbox"/> Delete			

CR2E037 (4/02)

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:

*Patricia B. Weaver*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*9 Sept 2002 (850) 931-068*