

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0383657 AV

DOCUMENT # P00000000688

1. Entity Name
J.C.A. ROLLOFF, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

03 JUN 10 PM 3:26

Principal Place of Business
2132 INDIAN RD
WEST PALM BEACH FL 33409

Mailing Address
2132 INDIAN RD
WEST PALM BEACH FL 33409

2. Principal Place of Business
2132 Indian Rd.
Suite, Apt. #, etc.

3. Mailing Address
"SAME"
Suite, Apt. #, etc.

City & State
West Palm Bch, FL
Zip 33409 Country USA

City & State

4. FEI Number 65-0975414

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

AUTEN, SUSAN H
2132 INDIAN ROAD
WEST PALM BEACH FL 33409

7. Name and Address of New Registered Agent

Name Auten Laura M
Street Address (P.O. Box Number is Not Acceptable)
2132 Indian Rd.
City West Palm Bch, FL Zip Code 33409

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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME AUTEN, SUSAN H
STREET ADDRESS 2132 INDIAN ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33409 ☐ Delete

TITLE P
NAME AUTEN, JOHN G
STREET ADDRESS 2132 INDIAN RD
CITY-ST-ZIP WEST PALM BEACH FL 33409 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
700020966947
06/18/03--01039--009 **150.00

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

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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 607, 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John G. Auten 6/2/03 (561) 640-2977

Date

Daytime Phone #

CR2E034 (10/02)

Attachment^{7F}

June 2, 2003

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Division of Corporations
Uniform Business Report Filings
PO BOX 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I, Laura Auten strongly apologize for filing our report late. I was out of work for over a month and just got back. I spoke with a UBR Representative and they told me to send in my report w/ the \$150 fee along with this letter. If you have any questions, please call me at (561) 640-2977. Again, sorry for any inconveniences I may have caused.

Kind regards,

Laura Auten
Office Manager