

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000002598

1. Entity Name

EXPRESS INK & PAPER CO.

**FILED**  
**May 01, 2001 8:00 am**  
**Secretary of State**

05-01-2001 90056 040 \*\*\*150.00

Principal Place of Business

5745 SUMMERSIDE LANE  
SARASOTA FL 34231

Mailing Address

5745 SUMMERSIDE LANE  
SARASOTA FL 34231

2. Principal Place of Business

5652 Swift Rd.

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Sarasota FL

City & State

Zip

34231

Country

U.S.A.

Zip

Country

4. FEI Number

65-0971585

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JACOB, DAVID J  
5745 SUMMERSIDE LANE  
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name  
Melodee Dougherty  
Street Address (P.O. Box Number is Not Acceptable)  
5745 Summerside Lane  
City  
Sarasota FL Zip Code  
34231

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 Melodee Dougherty PRESIDENT

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

4-16-01

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. **PRESIDENT OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DAVID J JACOB  
5745 SUMMERSIDE LN  
SARASOTA FL 34231 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

12. **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PRESIDENT  
MELODEE DOUGHERTY  
5745 SUMMERSIDE LN  
SARASOTA FL 34231 ☒ Change ☐ Addition

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

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

TITLE  
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CITY - ST - ZIP  
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CITY - ST - ZIP  
☐ Change ☐ Addition

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Melodee Dougherty  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-01

Date:

941-927-5500

Daytime Phone #

CR2E034 (10.00)