

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90705 035 ***150.00

DOCUMENT # P00000025375

1. Entity Name
THE TALKING JAR SERIES, INC.



Principal Place of Business
3822 NW 23RD MANOR
COCONUT CREEK FL 33066

Mailing Address
3822 NW 23RD MANOR
COCONUT CREEK FL 33066



☐ CHECK HERE IF MAKING CHANGES

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 65-1108779

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

FORD, JEANNE A
3822 NW 23RD MANOR
COCONUT CREEK FL 33066

Name JEANNE A. DEXTER (name change)
Street Address (P.O. Box Number is Not Acceptable) SAME
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 *Jeane A. Dexter*

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

(NOTE: Registered Agent signature required when reinstating)

3/11/03
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V
NAME SCHWEINLER, PAUL
STREET ADDRESS 1515 N. UNIVERSITY DR., STE. 205D
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

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

TITLE T
NAME DEXTER, DOUGLAS K
STREET ADDRESS 3822 N.W. 23RD MANOR
CITY-ST-ZIP COCONUT CREEK FL 33066 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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 information empowered.

SIGNATURE: *Jeane A. Dexter*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeane A. DEXTER 3/11/03 954-984-0338

Date

Daytime Phone #

CR2E034 (10/02)

10046064
P00000025375

ATTACHMENT

Department of Health • Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
TYPE IN UPPER CASE
USE BLACK INK

This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

(STATE FILE NUMBER)

DATE RETURNED: APR 24 2001
RECORDED: BOOK 336 PAGE 3373
HOWARD C. FORMAN CLERK OF COURT
BY *DW*, DEPUTY CLERK

ML-CE-01-002961

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) DOUGLAS KENT DEXTER			2. DATE OF BIRTH (Month, Day, Year) MAY 05, 1959	
3a. RESIDENCE - CITY, TOWN, OR LOCATION LAKE WORTH		3b. COUNTY PALM BEACH	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) OHIO
5a. BRIDE'S NAME (First, Middle, Last) JEANNE ANN FORD			5b. MAIDEN SURNAME (If different) MILLER	
6a. RESIDENCE - CITY, TOWN, OR LOCATION COCONUT CREEK		6b. COUNTY BROWARD	6c. STATE FLORIDA	6d. DATE OF BIRTH (Month, Day, Year) OCT 24, 1954
7a. RESIDENCE - CITY, TOWN, OR LOCATION COCONUT CREEK		7b. COUNTY BROWARD	7c. STATE FLORIDA	7d. BIRTHPLACE (State or Foreign Country) OHIO

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name using black ink) <i>Douglas Kent Dexter</i>		10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) MAR 15, 2001	
11. TITLE OF OFFICIAL DEPUTY CLERK		12. SIGNATURE OF OFFICIAL (Use black ink) <i>T. T. Gray</i>	
13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>Jeanne Ann Ford</i>		14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) MAR 15, 2001	
15. TITLE OF OFFICIAL DEPUTY CLERK		16. SIGNATURE OF OFFICIAL (Use black ink) <i>T. T. Gray</i>	

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

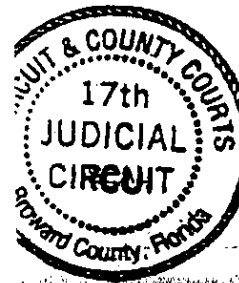
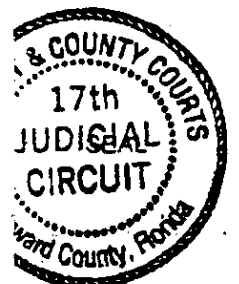
17. COUNTY ISSUING LICENSE BROWARD	18. DATE LICENSE ISSUED MAR 15, 2001	18a. DATE LICENSE EFFECTIVE MAR 18, 2001	19. EXPIRATION DATE MAY 16, 2001
20a. SIGNATURE OF COURT CLERK OR JUDGE <i>T. T. Gray</i>		20b. TITLE DEPUTY CLERK	20c. BY D.C.

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) 3/31/01	22. CITY, TOWN, OR LOCATION OF MARRIAGE Pompano Beach, FL		
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>Rev. David Rice</i>		23c. ADDRESS (Of person performing ceremony) 2100 NE 4th St Ft Lauderdale, FL 33308	
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) Rev. David Rice		24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Glenda Rogers</i>	
		25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Mark Smith</i>	

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED



SEAL