

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000030840

1. Entity Name  
LIQUOR SOLUTIONS.COM, INC.

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90437 032 \*\*\*150.00

Principal Place of Business

1506 FIRST STREET APT. 1  
NEPTUNE BEACH FL 32266

Mailing Address

1506 FIRST STREET APT. 1  
NEPTUNE BEACH FL 32266

2. Principal Place of Business

711 3rd St

3. Mailing Address

711 3rd St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE 12

STE 12

City & State

Jacksonville Bch, Fla

City & State

Jacksonville Bch Fla

4. FEI Number

59-3636577

Applied For

Not Applicable

Zip

32250

Country

USA

Zip

32250

Country

USA

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

JONES, EVAN L

1506 FIRST STREET APT. 1  
NEPTUNE BEACH FL 32266

Name

Evan L Jones

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

711 3rd St

Ste 12

Jacksonville Bch

FL

Zip Code

32250

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

*Evan L Jones*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME CHANDLER, C.T. III  
STREET ADDRESS 2134 BAY ROAD  
CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE VD ☒ Delete  
NAME WESTBURY, HEYWARD C  
STREET ADDRESS 14330 CORAL REEF DRIVE SOUTH  
CITY-ST-ZIP JACKSONVILLE FL 32246

TITLE STD ☐ Delete  
NAME JONES, EVAN L  
STREET ADDRESS 1506 FIRST STREET APT. 1  
CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE D ☐ Delete  
NAME SCHEFFER, ROBERT B JR  
STREET ADDRESS 1505 BLUE HERON LN EAST  
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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:

*Evan L Jones* Evan L Jones

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-01

Date

904-249-3988

Daytime Phone #

CR2E034 (10/00)