

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90050 040 ***550.00

DOCUMENT # P00000032740

1. Entity Name
SOUTHEAST FIRE STOP, INC.



Principal Place of Business
116 HAWTHORNE RD.
ST. AUGUSTINE, FL 32086

Mailing Address
116 HAWTHORNE RD.
ST. AUGUSTINE, FL 32086

2. Principal Place of Business
6333 Custer Road
Suite, Apt. #, etc.

3. Mailing Address
6333 Custer Road
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Jacksonville, FL
Zip Country
32065 Duval

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Jacksonville, FL
Zip Country
32065 Duval

4. FEI Number
59-3633575

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

HENRY, CAVIN W
116 HAWTHORNE RD.
ST. AUGUSTINE, FL 32086

Name
Paula E Whipple
Street Address (P.O. Box Number is Not Acceptable)
6333 Custer Road

City Zip Code
Jacksonville FL 32065

7. Name and Address of New Registered Agent

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

Paula E Whipple

9/09/03

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
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
D HENRY, CAVIN W
116 HAWTHORNE RD.
ST. AUGUSTINE, FL 32086 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D HENRY, VICKIE L
116 HAWTHORNE RD.
ST. AUGUSTINE, FL 32086 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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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
P, D Paula E. Whipple
6333 Custer Road
Jacksonville, FL 32065 ☐ Change ☒ Addition

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

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

TITLE
NAME
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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:

Paula E Whipple

9/09/03

904-269-3328

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)