2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000037184

1. Entity Name

ST. LUCIE BLUES, INC.



FILED Mar 13, 2003 8:00 am Secretary of State

03-13-2003 90074 019 ***150.00

					GO WE THE			
Principal Place of Business 338 S.E. PT. ST. LUCIE BLVD. PORT SAINT LUCIE FL 34984			Mailing Address 338 S.E. PT. ST. LUCIE BLVD. PORT SAINT LUCIE FL 34984] 	91 (1) 88 (1) 2 (1)21 (1002)	1/ 86 1 +8711 8 78+ 2082
2. Principal Place of Business			3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IS	MAKING CHANC	200
City & State			City & State			4. FEI Number 65-0996753 Applied For		
Zip Country			Zip Country		у	5. Certificate of Status Desired		Not Applicable Additional
	6. Name and Add	Iress of Current Regist	arad Ament	-└			Fee Req	uired
	The street of th	iress or current negist	ered Agent		Nome	7. Name and Address of New Reg	istered Agent	
ENNIS I	LOYD A	~_			Name			
	HIDDEN RIVER DRIVE	·	Street Address		Street Address (P.O. Box Number is Not Acceptable)		
PUHI SA	UNT LUCIE FL 34983	3						
				-	Oit.			
		1			City		FL Zip C	
8. The above	e named entity submits	this statement for the pu	rpose of changing it	s reaistered	office or registere	ed agent, or both, in the State of Florid	n less (n m)	211.
the obliga	itions of registered ager	nt. j	. 5 5	9.010.00	omes of registers	ed agent, or both, in the State of Fibrio	a. Tam familiar wi	th, and accept
OLONIATURE	11 as	· ·						
SIGNATURE		me of registered agent and title if a						
*	- :		ipplicable. (NO	IE: Hegistered A	gent signature required	when reinstating)	DATE	
	ILE NOW!!! FEE !!				· · · · · · · · · · · · · · · · · · ·		·	
Afte	r May 1, 2003 Fee w	ill be \$550.00				9. Election Campaign Finan-	oing \$5	5.00 May Be
Make Check	k Payable to Florida	Department of State	Ì			Trust Fund Contribution.		ded to Fees
10.		OFFICERS AND DIRECT	ODE	T				
TITLE	PST	OLL ICEUS AIAD DIRECT		11.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	ORS IN 11
	ENNIS, LLOYD A	•	☐ Delete	TITLE		-	☐ Chang	e 🗌 Addition
NAME	TAT CE LUDDEN E	W.Ed. 550.		NAME				
STREET ADDRESS	747 SE HIDDEN R	IVER DRIVE		STREET A	ADDRESS			
CITY-ST-ZIP	PORT SAINT LUCIE	: FL 34983		CITY-ST	- ZIP			
TITLE			☐ Delete	TITLE	-+-			
NAME				NAME	l		Change	e 🔲 Addition
STREET ADDRESS				STREET A	UUBECC			
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NAME				NAME			-3,-	
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CITY-ST-ZIP				CITY-ST-	ŽIP			
TITLE	e Vi e e		☐ Delete	TITLE				
NAME				NAME	[☐ Change	Addition
STREET ADDRESS				STREET A	ODRESS			
CITY-ST-ZIP				CITY-ST-				
TITLE								
AME			Delete	TITLE			Change	☐ Addition
TREET ADDRESS				NAME				
CITY-ST-ZIP				STREET AD	1			
				CITY-ST-	ZIP			
ITLE	•		Delete '	TITLE			☐ Change	☐ Addition
AME				NAME	1		☐ change	☐ Addition
TREET ADDRESS				STREET AD	DRESS			- 1
ITY-ST-ZIP				CITY-ST-Z	'IP			
2. Thereby or	ertify that the information	n sunnlied with this file-	doop not available					
indicated of	on this report or suppler	nental report is true and	accurate and that m	uie exempti V signature	un stated in Secti shall have the cor	on 119.07(3)(i), Florida Statutes. I furth me legal effect as if made under oath; florida Statutes, and that we see	er certify that the	information
or the corp changed (oration or the receiver of	or trustee empowered to h an address, with all oth	execute this report a	as required b	by Chapter 607, F	ne legal effect as if made under oath; lorida Statutes; and that my name app	inai i am an office lears in Block 10 c	r or director
on an igour, t	un aud≱mment Will	icaliacoress with all off	IRE IIVA AMBOUVOZOG		. ,	, maine app	JULY TOUCK TO (i tittavancııc

SIGNATURE:

3-10-03

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