

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000040381**

1. Entity Name

WYNN BONE GALLERY, INC.**FILED**
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90199 050 ***150.00

0003798

Principal Place of Business

**139 MARINE STREET
ST. AUGUSTINE FL 32084**

Mailing Address

**139 MARINE STREET
ST. AUGUSTINE FL 32084**

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

59-3644956

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

**BROWN, RONALD W
66 CUNA STREET STE A
ST. AUGUSTINE FL 32084**

Name

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

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.

SIGNATURE

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BONE, WYNN**
STREET ADDRESS **139 MARINE STREET**
CITY-ST-ZIP **ST. AUGUSTINE FL 32084**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **D** ☐ Delete
NAME **JAFFRE, JAMES**
STREET ADDRESS **139 MARINE STREET**
CITY-ST-ZIP **ST. AUGUSTINE FL 32084**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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CITY-ST-ZIPTITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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:

JAMES JAFFRE**5/8/01**

Date

904 823 8717

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)

657001 Attachment
P00000040381

WYNN BONE GALLERY, INC.

Jim Jaffre & Wynn Bone - Directors

139 Marine Street

Saint Augustine, Florida 32084

Voice: 904 823 8717 E-mail: jimjaffre@aol.com

May 8, 2001

Division of Corporations
Uniform Business Report Filings
P.O.Box 1500
Tallahassee, FL
32302-1500

Dear Division of Corporations:

Enclosed is our check for \$150.00, with our 2001 Uniform Business Report Filing, Document # P00000040381.

We are late by 8 days. We ask for your forgiveness and understanding.

We are trying to open our business in early June . This is our first year for filing. We are not fully organized. This will not happen again. We are trying to get started.

Please accept our apology and please give us your kind consideration.

This will not happen again from us.

Thank you.



Jim Jaffre
Director
Wynn Bone Gallery, Inc.