

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000049821

1. Entity Name

JGRUPE CONSULTING, INC.

**FILED**  
**Mar 16, 2001 8:00 am**  
**Secretary of State**

03-16-2001 90019 046 \*\*\*150.00

Principal Place of Business

2601 ROBERT OLIVER AVENUE  
FERNANDINA BEACH FL 32034

Mailing Address

2601 ROBERT OLIVER AVENUE  
FERNANDINA BEACH FL 32034

00034455

2. Principal Place of Business

1328 Spring Blossom Lane  
Suite, Apt. #, etc.

3. Mailing Address

1328 Spring Blossom Lane  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Fernandina Beach, FL

City & State

Fernandina Beach, FL

4. FEI Number

59-364 6429

Applied For

Not Applicable

Zip

32034

Country

USA

Zip

32034

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRUPE, JOHN D  
2601 ROBERT OLIVER AVENUE  
FERNANDINA BEACH FL 32034

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
1328 Spring Blossom Lane  
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

*John D. Grupe*

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

(NOTE: Registered Agent signature required when reinstating)

March 14, 2001

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 PSTD  
NAME GRUPE, JOHN D  
STREET ADDRESS 2601 ROBERT OLIVER AVENUE  
CITY-ST-ZIP FERNANDINA BEACH FL 32034

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS 1328 Spring Blossom Lane  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

John D. Grupe, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 14, 2001

Date

(904) 277-9670

Daytime Phone #

CR2E034 (10/00)