

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90297 018 ***158.75

DOCUMENT # P00000080457

1. Entity Name

JOURNEY GROUP, INC.

Principal Place of Business

**5341-10TH STREET
 ZEPHYRHILLS FL 33540**

Mailing Address

**5341-10TH STREET
 ZEPHYRHILLS FL 33540**

2. Principal Place of Business

5341-10th STREET

3. Mailing Address

PO. Box 278

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Zephyrhills, FL

City & State

Zephyrhills, FL

4. FEI Number

59-36607841

Applied For

Not Applicable

Zip

33541

Country

PASCO

Zip

33539

Country

PASCO

5. Certificate of Status Desired

FL

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**JOHNSON, LEONARD H
 37837 MERIDIAN AVENUE
 SUITE 314
 DADE CITY FL 33525**

7. Name and Address of New Registered Agent

Name **Russell M Taylor Jr.**
 Street Address (P.O. Box Number is Not Acceptable)
5341 10th St.
Zephyrhills, FL
 City **FL** Zip Code **33541**

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 agent applicable

(NOTE: Registered Agent signature required when reinstating)

01-30-01

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	D	<input type="checkbox"/> Delete
NAME	TAYLOR, RUSSELL M JR.	
STREET ADDRESS	37714 POINSETTIA AVENUE Poinsettia Ave	
CITY-ST-ZIP	DADE CITY FL 33526	
TITLE	D	<input type="checkbox"/> Delete
NAME	SANGPRASERT, SUPPAVUT	
STREET ADDRESS	5314 10TH STREET	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHOWMAN, ROBERT L JR	
STREET ADDRESS	5314 10TH STREET	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-30-01

Date

813-779-2278

Daytime Phone #

CR2E034 (10/00)