

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 09, 2001 8:00 am
Secretary of State

05-09-2001 90007 037 ***150.00

DOCUMENT # P00000089778

1. Entity Name

JOHN LONG & ASSOCIATES INC.

Principal Place of Business

4737 NE SAVANNA RD.
JENSEN BEACH FL 34957

Mailing Address

4737 NE SAVANNA RD.
JENSEN BEACH FL 34957

2. Principal Place of Business

4737 NE SAVANNAH RD

3. Mailing Address

PO BOX 1094

Suite, Apt. #, etc.

Jensen Beach FL 34957

Suite, Apt. #, etc.

CHAS SC

City & State

Jensen Beach FL 34957

City & State

CHAS SC

Zip

34957

Country

MARTIN

Zip

29402

Country

CHAS

4. FEI Number

APPLIED FOR

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

LONG, JOHN N
4737 NE SAVANNA RD.
JENSEN BEACH FL 34957

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 State

10. 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 PD ☐ Delete
NAME LONG, JOHN
STREET ADDRESS 4737 NE SAVANNA RD.
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ~~PO BOX 1094~~ ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME STEWART, DEBORAH
STREET ADDRESS 4737 NE SAVANNA RD.
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE MARY MCCANTS ☐ Change ☒ Addition
NAME
STREET ADDRESS 1306 Hester St
CITY-ST-ZIP Charleston SC 29403

TITLE TD ☐ Delete
NAME MCHARDY, ALVIN
STREET ADDRESS 4737 NE SAVANNA RD.
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE SD ☐ Delete
NAME COLLIER, LEON A
STREET ADDRESS 4737 NE SAVANNA RD.
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN LONG

Date

4/29/01

Daytime Phone #

843-875-1286

CR2E034 (10/00)