

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000101214**

1. Entity Name

ROCKLEDGE SERVICE CENTER, INC.**FILED****May 14, 2001 8:00 am**
Secretary of State

05-14-2001 90259 022 ***150.00

Principal Place of Business

**1258 S US HWY 1
ROCKLEDGE FL 32955**

Mailing Address

**KENNINGTON HOUSE
3222 WINDSOR ESTATES DR
MELBOURNE FL 32940**

2. Principal Place of Business

3. Mailing Address

1258 S. US. 1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Rockledge FL

4. FEI Number

59-3678428

Applied For

Not Applicable

Zip

Country

Zip

Country

32955**Brevard**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****BLAND, SIMON C
KENSINGTON HOUSE
3222 EINDSOR ESTATE DR
MELBOURNE FL 32940**

Name

Simon C Bland

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

Kensington House**3222 Windsor estates Dr**

City

melbourne**FL**

Zip Code

32940

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

Simon C Bland**4/27/01**

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
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Simon C Bland
Kensington House
3222 Windsor estates Dr
melbourne FL 32940**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
**D Heather J Bland
Kensington House
3222 Windsor estates Dr
melbourne FL 32940**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
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:**Simon C Bland****4/27/01****(321) 631 0620**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)