FILED

Apr 14, 2003 8:00 am § Secretary of State

04-14-2003 90368 016 ***150.00

60016834

•									
2. Principal P	lace of Business	3. Mailing Address					JBN 818001 011110 51111	1989 (18)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & Stat	е	City & State			4. 1	59-3708178		pplied For ot Applicable	
Zip	Country Zip		Cour	itry	5. Certificate of Status Desired See Require				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
				Name .					
FINN, REGINA				Street Address (P.O. Box Number is Not Acceptable)					
187 ALDERSGATE DR									
GREEN COVE SPRINGS FL 32043									
				City FL Zip Code					
	named entity submits this statement fo	r the purpose of changing	g its register	ed office or	registered ag	ent, or both, in the State of Florida. I a	m familiar with,	and accept	
the obligat	ions of registered agent.			•	<u> </u>				
SIGNATURE .	REGINA FINN		Ku	ma	<u>Ja</u>	~ 4-	10-01		
	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Registere	Ugent signatur	re required when re	instating) DAT	<u> </u>		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State				Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
10.	OFFICERS AND	DIRECTORS	11.		AD	DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11	
TITLE	D	☐ Delete	TITLE				Change	☐ Addition	
NAME Street Address	Finn, regina w 187 Aldersgate Dr		NAM	E ET ADDRESS					
CITY-ST-ZIP	GREEN COVE SPRINGS FL 3204	3		-ST-ZIP					
TITLE	D	☐ Delete	TITLE	:			☐ Change	Addition	
IAME	FINN, CHARLES F		NAM	E					
TREET ADDRESS	187 ALDERSGATE DR			ET ADDRESS					
CITY-ST-ZIP	GREEN COVE SPRINGS FL 3204			-ST-ZIP					
TTLE -	.	- Delete			- Table 1	The state of the s	🗔 Change	☐ Addition	
IAME Treet address			NAM. STRE	ET ADDRESS					
CITY-ST-ZIP				-ST-ZIP				:	
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IAME			NAMI	E					
TREET ADDRESS				ET ADDRESS					
:ITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			-ST-ZIP					
itle Iame		☐ Delete	TITLE	1			Change	☐ Addition	
TREET ADDRESS	•		1	ET ADDRESS					
SITY-ST-ZIP				-ST-ZIP					
ITLE	, — , — — — — — — — — — — — — — — — — —	☐ Delete	TITLE				☐ Change	Addition	
IAME			NAME	: İ					
TREET ADDRESS				ET ADDRESS				}	
ITY-ST-ZIP	If the state of th			-ST-ZIP					
of the corp	ertify that the information supplied with on this report or supplemental report is obration or the receiver or trustee empo or on an attachment with an address, w	true and accurate and th wered to execute this rep	iat my signat oort as requir	ure shali ha	ve the same l	egal effect as if made under gath: that	Lam an officer	or director I	

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

STITCHES R US, INC.

Principal Place of Business

1613 BLANDING BLVD

MIDDLEBURG FL 32068

SIGNATURE:

1. Entity Name

P00000115642

Mailing Address

1613 BLANDING BLVD

MIDDLEBURG FL 32068