2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State
04-09-2002 91190 009 ***150.00

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DOCUMENT # P00000116050

1. Entity Name
TAYLOR DIVERSIFIED ENTERPRISES, INC.

Principal Place of Business	Mailing Address
11885 ROYAL PALM BLVD #102 CORAL SPRINGS FL 33065	11885 ROYAL PALM BLVD #102 CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1717 C.R. 220 #2604 Suite, Apt. #, etc.	1717 CR 220 #2604 Suite, Apt. #, etc.
City & State: ORANGE PARK, FL	City & State: ORANGE PARK, FL
Zip: 32003 Country: USA	Zip: 32003 Country: USA

4. FEI Number: 65-1063857 ☐ 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
TAYLOR, MICHAEL K 11885 ROYAL PALM BLVD #102 CORAL SPRINGS FL 33065	Name Street Address (P.O. Box Number is Not Acceptable): 1717 CR 220 #2604 City: ORANGE PARK, FL Zip Code: 32003

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: _____ DATE: 4/2/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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	D TAYLOR, MICHAEL K 11885 ROYAL PALM BLVD #102 CORAL SPRINGS FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~S,T,~~ P,T,D 1717 C.R. 220 #2604 ORANGE PARK, FL 32003	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, TARI J 11885 ROYAL PALM BLVD #102 CORAL SPRINGS FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP,S,D 1717 C.R. 220 #2604 ORANGE PARK, FL 32003	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, JERRY K 3467 W CYPRESS DR DUNNELLON FL 34433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, KAREN A 3467 W CYPRESS DR DUNNELLON FL 34433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/01)

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: _____ 4/2/02 904-278-1143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #