

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90069 043 ***150.00

0023014 AV

DOCUMENT # P01000002544

1. Entity Name
VANNORTWICK, INC.



Principal Place of Business
**701 FISK STREET #110
JACKSONVILLE FL 32204**

Mailing Address
**701 RIVERSIDE PARK PLACE
SUITE 110
JACKSONVILLE FL 32204**



2. Principal Place of Business
701 Riverside Park Place

3. Mailing Address
701 Riverside Park Place

Suite, Apt. #, etc.
Suite 110

Suite, Apt. #, etc.
Suite 110

☐ CHECK HERE IF MAKING CHANGES

City & State
Jacksonville, FL

City & State
Jacksonville, FL

4. FEI Number
59-3689565

Applied For
☐ Not Applicable

Zip
32204 Country

Zip
32204 Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**YONG, FRANK J ESQ.
701 RIVERSIDE PARK PLACE
SUITE 110
JACKSONVILLE FL 32204**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
VANNORTWICK, WILLIAM A JR
3006 AVON CIR
TALLAHASSEE FL 32312** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SDT
GILMORE, CLARE V
4756 ORTEGA FOREST DR
JACKSONVILLE FL 32210** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
VANNORTWICK, NINA G
3629 RIVERSIDE DRIVE
JACKSONVILLE FL 32205** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
VANNORTWICK, WALLACE T
7942 GOODWOOD BLVD
BATON ROUGE LA 70806** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE REQUIRED
W. A. Vannortwick, Jr.
pres.

4/28/03 850/487-1000
Date Daytime Phone #

CR2E034 (10/02)