2002 UNIFORM BUSINESS REPORT (UBR)

Jul 08, 2002 8:00 am Secretary of State P01000005789 **DOCUMENT #** 05-19-2002 90057 023 ***150.00 1. Entity Name SECOND THOUGHTS, INC. OF JACKSONVILLE Principal Place of Business Mailing Address 8750 PERIMETER PARK BLVD. 8750 PERIMETER PARK BLVD. JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 2. Principal Place of Business 3. Mailing Address N. 17th #502 #550<u>2</u> DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State FEI Number Not Applicable Country USA Čoluntry \$8.75 Additional 5. Certificate of Status Desired Fee Required USA 32250 7. Name and Address of New Registered Agent ... 6. Name and Address of Current Registered Agent Name ~ GREEN, KEVIN S Street Address (P.O. Box Number is Not Acceptable) 8750 PERIMETER PARK BLVD. JACKSONVILLE FL 32216 in the State of Florida. 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (9/01) Addition ☐ Change ☐ Delete TITLE tresident TITLE Sharon Coffman NAME NAME 5 N. 17th Ave. #502 **CR2E034** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP locksonville Boach FC ☐ Change ■ Addition Oelete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change ☐ Delate TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 cath; 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.

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TED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

904-241-0242

Attachment # P01000005789

Kevin S. Green, C.P.A.

Certified Public Accountant

5 North 17th Avenue #502 Jacksonville Beach, Florida 32250

E-mail: KSGreenCPA@aol.com Office: 904-241-0242

904-635-7276

July 1, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern,

I just spoke with a Division of Corporations representative on the phone regarding our not receiving the attached date-sensitive correspondence until recently (and not in time to respond within the time frame you specified). Her instructions were to send our response back to the Division of Corporations now, since we were still not too far past the response date specified.

Please allow our response to be considered received by you within your specified response time due to our extenuating circumstance.

Thank you for your time and consideration in this matter. Your assistance is much appreciated.

Sincerely, Kevin S. Srein

Kevin S. Green, C.P.A.