

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90199 003 ***150.00

0332849 AV

DOCUMENT # P01000018727

1. Entity Name
 JS OFFICE PRODUCTS, INC.

Principal Place of Business **Mailing Address**

375 N. UNIVERSITY DRIVE 375 N. UNIVERSITY DRIVE
 PLANTATION FL 33324 PLANTATION FL 33324

2. Principal Place of Business **3. Mailing Address**

9521 S. Orange Blossom Trail 9521 S. Orange Blossom Trail
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Ste. 112 Ste. 112
 City & State City & State
 Orlando, FL Orlando, FL
 Zip Zip
 32837 32837
 Country Country
 USA USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 05-1078427 **Applied For**
 Not Applicable

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

6. Name and Address of Current Registered Agent

MILLS, FREDERICK J
 MORRISON & MILL, P.A.
 1200 W. PLATT STREET, SUITE 100
 TAMPA FL 33606

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.

SIGNATURE _____ (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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	TITLE	DI
NAME	BELL, STACEY A	NAME	FRISK, STACY A.
STREET ADDRESS	13840 OSPREY LINKS ROAD #212	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32837	CITY-ST-ZIP	
TITLE	D	TITLE	DIT
NAME	FRISK, JAMES	NAME	
STREET ADDRESS	2410 SUNBIRD PLACE	STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32904	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	FRISK, PAT	NAME	
STREET ADDRESS	2410 SUNBIRD PLACE	STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32904	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	MERRITT, RALPH	NAME	
STREET ADDRESS	700 OLD NOB HILL ROAD	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33324	CITY-ST-ZIP	
TITLE	D	TITLE	D/S
NAME	MERRITT, GLORIA	NAME	
STREET ADDRESS	700 OLD NOB HILL ROAD	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33324	CITY-ST-ZIP	
TITLE		TITLE	P
NAME		NAME	JOHN M. FRISK
STREET ADDRESS		STREET ADDRESS	13840 OSPREY LINKS RD APT 212
CITY-ST-ZIP		CITY-ST-ZIP	ORLANDO, FL 32837

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: Stacy A. Frisk **STACY A. FRISK** 04/05/02 407/812-1881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)