

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90096 008 ***150.00

DOCUMENT # **P01000042774**

1. Entity Name

TERJEANMC, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11612 JEFFERSON Rd.

Suite, Apt. #, etc.

3. Mailing Address

11612 JEFFERSON Rd.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

THONOTOSASSA, FL

City & State

THONOTOSASSA, FL

4. FEI Number

59-3717819

Applied For

Not Applicable

Zip

Country

33592 U.S.

Zip

Country

33592 U.S.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

TERRY J. McENIRY

Street Address (P.O. Box Number is Not Acceptable)

11612 JEFFERSON ROAD

City

THONOTOSASSA

FL

Zip Code

33592

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(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) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25**

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PRESIDENT
TERRY J. McENIRY
11612 JEFFERSON ROAD
THONOTOSASSA, FL 33592**

TITLE
NAME
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CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like employees.

SIGNATURE:

Terry J. McEniry

TERRY J. McENIRY

Date

Daytime Phone #

4-26-02 813-986-6978

CR2E034B (12/01)