

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91480 016 ***150.00

DOCUMENT # P01000045197

1. Entity Name

THE ELKTON GROUP, INC.

Principal Place of Business

**4245 C.R. 13 S
 ELKTON FL 32033**

Mailing Address

**P.O. BOX 57
 ELKTON FL 32033**

2. Principal Place of Business

139 Phillips Dairy Road

3. Mailing Address

Suite, Apt. #, etc.

City & State

Palatka, Fla

City & State

Zip

32131

Country

Zip

Country

4. FEI Number

59-3714201

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

MARTIN, JANE K

**4245 C.R. 13 S
 ELKTON FL 32033**

7. Name and Address of New Registered Agent

Name

Raymond Burkes

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

139 Phillips Dairy Road

City

Palatka

FL

Zip Code

32131

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

Raymond Burkes

Raymond Burkes

P/S

4/18-2002

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) ☐

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

TITLE **PS** ☒ Delete
 NAME **MARTIN, JANE K**
 STREET ADDRESS **P.O. BOX 57**
 CITY-ST-ZIP **ELKTON FL 32033**

TITLE **VT** ☐ Delete
 NAME **MARTIN, EDWARD L**
 STREET ADDRESS **P.O. BOX 57**
 CITY-ST-ZIP **ELKTON FL 32033**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P.S.** ☒ Change ☐ Addition
 NAME **Raymond Burkes**
 STREET ADDRESS **139 Phillips Dairy Road**
 CITY-ST-ZIP **Palatka, Fla 32131**

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

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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:

Raymond Burkes

Raymond Burkes P/S

4-18-2002

386-328-1854

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)