

2002 UNIFORM BUSINESS REPORT (UBR)

FILED 06-03-2002 91165 034 ***158.75
P01000045824

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000045824

1. Entity Name
BOTTOM RESOURCE MANAGEMENT GROUP, INC.

Principal Place of Business

1704 CHERRY STREET
PANAMA CITY FL 32401

Mailing Address

1704 CHERRY STREET
PANAMA CITY FL 32401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3719031

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

GRIZZARD, DANNY
1704 CHERRY STREET
PANAMA CITY FL 32401

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

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 NAME ☐ Delete
D RAFFIELD, EUGENE
STREET ADDRESS 2103 CYPRESS AVE
CITY-ST-ZIP PORT ST JOE FL 32456

TITLE NAME ☐ Delete
D MULLEN, JAMES P
STREET ADDRESS 110 NORRIDGE PL
CITY-ST-ZIP BIRMINGHAM AL 53124

TITLE NAME ☐ Delete
D BLACKBURN, VERAN O
STREET ADDRESS 410 TEXAS DRIVE
CITY-ST-ZIP MEXICO BEACH FL 32410

TITLE NAME ☐ Delete
D GRIZZARD, DANNY
STREET ADDRESS 1704 CHERRY STREET
CITY-ST-ZIP PANAMA CITY FL 32401

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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:

30MA-02

850-872 8016

CR2002 10/01