

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90234 028 ***150.00

DOCUMENT # P01000064810

1. Entity Name

THE JEFFERSON COMPANY, INC.

Principal Place of Business

**1926 CELTIC RD
TALLAHASSEE FL 32317**

Mailing Address

**1926 CELTIC RD
TALLAHASSEE FL 32317**

2. Principal Place of Business

3. Mailing Address

P.O. Box 16224

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tallahassee

Zip

Country

Zip

Country

32317

US

4. FEI Number

59-3732796

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE FL 32301**

Name

Nehemiah L. Jefferson

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

1926 Celtic Road

City

Tallahassee

FL

Zip Code

32317

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 Nehemiah L. Jefferson DATE _____

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	JEFFERSON, NEHEMIAH L	
STREET ADDRESS	1926 CELTIC RD	
CITY-ST-ZIP	TALLAHASSEE FL 32317	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
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: Nehemiah L. Jefferson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/02 (850) 591-6376
Date Daytime Phone #

CR2E034 (9/01)