

2000 UNIFORM BUSINESS REPORT (UBR)

ATX1

FILED

02 MAY -6 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000064982

1. Entity Name
EASON ENTERPRISES INC.

Principal Place of Business Mailing Address
4431 RALEIGH STREET
ORLANDO, FL 32811

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
	USA		

4. FEI Number 59-3741153	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIPLIN, GARY A
725 S. GOLDWYN AVE STE. B
ORLANDO, FL 32811

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, 2000 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	DP	Delete
NAME	EASON, JON L.	
STREET ADDRESS	4431 RALEIGH ST	
CITY - ST - ZIP	ORLANDO, FL 32811	
TITLE	VP	Delete
NAME	EASON, ROSALIND	
STREET ADDRESS	4431 RALEIGH ST	
CITY - ST - ZIP	ORLANDO, FL 32811	
TITLE	S	Delete
NAME	EASON, DERALD GRIER	
STREET ADDRESS	4431 RALEIGH ST	
CITY - ST - ZIP	ORLANDO, FL 32811	
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	Change	Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

CR2E034 (9/99)

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-05/16/02--01050--029
***150.00 ***150.00

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: 4-30-02