

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 22, 2002 8:00 am
Secretary of State

07-22-2002 90167 032 ***150.00

DOCUMENT # P01000065775

1. Entity Name
LOGGERHEAD ENTERPRISES, INC.

Principal Place of Business
 728 CASA LOMA BLVD.
 BOYNTON BEACH FL 33435

Mailing Address
 728 CASA LOMA BLVD.
 BOYNTON BEACH FL 33435

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

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

HILL, JAMES R.
4418 WALDEN CIRCLE
LAKE WORTH FL 33463

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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:

SIGNATURE REQUIRED

7-18-02

561 588-8686

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment
JR # PO 1000065-775

diver123

From: "corphelp" <corphelp@mail.dos.state.fl.us>
To: "James Hill" <diver123@bellsouth.net>
Sent: Thursday, July 18, 2002 9:53 AM
Subject: RE: Penalty Payment ?

Send in the report with the regular fee, also send a letter indicating you did not receive the first notice.

Mike
Internet Access

-----Original Message-----

From: James Hill [mailto:diver123@bellsouth.net]
Sent: Thursday, July 18, 2002 9:42 AM
To: corphelp@mail.dos.state.fl.us
Subject: Penalty Payment ?

To whom it may concern:

I would like to know how come I'm getting a late bill but I never got an original one. I now understand that it was Due in May. Do I still owe the penalty or can I just pay the \$150. since I never received original bill.

Thank you

Loggerhead Enterprises
James R. Hill

7/18/2002