

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90376 034 ***150.00

045641 AV

DOCUMENT # P01000068092

1. Entity Name

JCSP PROPERTY MANAGEMENT, INC.



Principal Place of Business

1925 OXNARD CT
TAMPA FL 33612

Mailing Address

1925 OXNARD CT
TAMPA FL 33612

2. Principal Place of Business

12112 Buffington Lane

3. Mailing Address

12112 Buffington Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Riverview, FL

City & State

Riverview, FL

Zip

33569

Country

USA

Zip

33569

Country

USA

4. FEI Number

59-3733042

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

POTTER, JUDSON F
1925 OXNARD CT
TAMPA FL 33612

7. Name and Address of New Registered Agent

Name Potter, Judson F
Street Address (P.O. Box Number is Not Acceptable)
12112 Buffington Lane
City Riverview FL 33569

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

Judson F. Potter Judson F. Potter

4/1/03

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	POTTER, JUDSON F	
STREET ADDRESS	1925 OXNARD CT	
CITY-ST-ZIP	TAMPA FL 33612	
TITLE	PVST	<input type="checkbox"/> Delete
NAME	POTTER, JUDSON F	
STREET ADDRESS	1925 OXNARD CT	
CITY-ST-ZIP	TAMPA FL 33612	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Potter, Judson F	
STREET ADDRESS	12112 Buffington Lane	
CITY-ST-ZIP	Riverview, FL 33569	
TITLE	PVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Potter, Judson F	
STREET ADDRESS	12112 Buffington Lane	
CITY-ST-ZIP	Riverview, FL 33569	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Judson F. Potter Judson F. Potter 4/1/03 813-672-3681

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)