

# 2002 UNIFORM BUSINESS REPORT (UBR)

1  
**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

01-14-2002 90042 013 \*\*\*150.00

**DOCUMENT # P01000084772**

1. Entity Name

**J & D CUSTOM BUILDERS INC.**

Principal Place of Business

**2141 ALTERNATE A1A SOUTH  
SUITE 330  
JUPITER FL 33477**

Mailing Address

**2141 ALTERNATE A1A SOUTH  
SUITE 330  
JUPITER FL 33477**

**14416**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEJ Number

**65-1133135**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATE CREATIONS NETWORK INC.**

**941 FOURTH STREET #200**

**MIAMI BEACH FL 33139**

7. Name and Address of New Registered Agent

Name

**Norma L. Protting**

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

**2141 ALTERNATE A1A S.**

**Suite 330**

City

**Jupiter**

**FL**

Zip Code

**33477**

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

**Norma L. Protting**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Jan. 4, 2002**

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 **D** ☐ Delete  
NAME **PROTTING, JOSEPH**  
STREET ADDRESS **2141 ALTERNATE A1A SOUTH SUITE 330**  
CITY-ST-ZIP **JUPITER FL 33477**

TITLE **D** ☐ Delete  
NAME **KANACH, DARYL**  
STREET ADDRESS **2141 ALTERNATE A1A SOUTH SUITE 330**  
CITY-ST-ZIP **JUPITER FL 33477**

TITLE **D** ☐ Delete  
NAME **PROTTING, NORMA**  
STREET ADDRESS **2141 ALTERNATE A1A SOUTH SUITE 330**  
CITY-ST-ZIP **JUPITER FL 33477**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 **PRESIDENT** ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **Sec/TRES.** ☐ 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

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/Sec**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**Jan. 4, 2002 (561) 575-5299**

CR2E034 (9/01)