

# 2002 UNIFORM BUSINESS REPORT (UBR)

4/1

**FILED**  
**Jun 18, 2002 8:00 am**  
**Secretary of State**

04-16-2002 90103 028 \*\*\*150.00

**DOCUMENT # P01000087026**

1. Entity Name

IN TOUCH OF JACKSONVILLE, INC.

Principal Place of Business

11757 BEACH BLVD. #8  
JACKSONVILLE FL 32248

Mailing Address

11757 BEACH BLVD. #8  
JACKSONVILLE FL 32248

93672

2. Principal Place of Business

2550 (2) MAYPORT RD

3. Mailing Address

P.O. Box 2556

Suite, Apt. #, etc.

2

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Jacksonville FL

City & State

Jacksonville FL

4. FEI Number

52-2346807

Applied For

Not Applicable

Zip

32233

Country

USA

Zip

32243

Country

USA

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

ROJO, EVELYN  
3230 BEACHWOOD AVE.  
JACKSONVILLE FL 32248

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, 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 PD  
NAME ROJO, EVELYN  
STREET ADDRESS 3230 BEACHWOOD AVE.  
CITY-ST-ZIP JACKSONVILLE FL 32248 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME EVELYN ROJO ☒ Change ☐ Addition  
STREET ADDRESS 3130 BEACHWOOD AVE.  
CITY-ST-ZIP JACKSONVILLE FL 32246

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-1-02 (904)249-1505

CR2E034 (9/01)

Attachment

93612  
#PD1000082020

June 12, 2002

Please make the necessary changes, or guide me to the right forms to make an address correction. My home address is 3130 Beachwood Blvd. Jacksonville FL. 32246

My business address is 2550 (2) Mayport Rd. Jacksonville, Florida. 32233

The name has also changed as follows: Intouch of Jacksonville Inc.  
DBA A-ok Communications.

Thank you for your help

  
Evelyn Rojo