

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91395 011 ***150.00

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DOCUMENT # P01000095468

1. Entity Name
MMJR, INC.

Principal Place of Business
**3088 COASTAL HWY
 ST AUGUSTINE FL 32095**

Mailing Address
**3088 COASTAL HWY
 ST AUGUSTINE FL 32095**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5266 West Rd 200

3. Mailing Address

5456 NORMANDY Blvd

Suite/Apt. #, etc.

Suite/Apt. #, etc.

City & State

JALAHAN, FL

City & State

JACKSONVILLE, FL

Zip

32011

Country

NASSAU

Zip

32205

Country

DUVAL

4. FEI Number

59-3747058

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MURDOCK, STEWART E
 3088 COASTAL HWY
 ST AUGUSTINE FL 32095**

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, 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	MURDOCK, STEWART E	
STREET ADDRESS	3088 COASTAL HWY	
CITY-ST-ZIP	ST AUGUSTINE FL 32095	
TITLE	D	☐ Delete
NAME	MURDOCK, SALLY B	
STREET ADDRESS	3088 COASTAL HWY	
CITY-ST-ZIP	ST AUGUSTINE FL 32095	
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/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SEC/TREAS/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V-PRES/D	☐ Change ☒ Addition
NAME	Michael F. Murdock	
STREET ADDRESS	2564 Ebersol Rd.	
CITY-ST-ZIP	JACKSONVILLE, FL 32216	
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:

Sally B. Murdock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/02

Date

904783-1606

Daytime Phone #

CR2E034 (9/01)