

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90023 018 ***150.00

0439618 AV

DOCUMENT # P01000102092

1. Entity Name

UPCHURCH SALES & MARKETING, INC.

Principal Place of Business

9208 HIGHLAND RIDGE WAY
TAMPA FL 33647

Mailing Address

9208 HIGHLAND RIDGE WAY
TAMPA FL 33647

2. Principal Place of Business

8801 Hunter's Lake Dr.

3. Mailing Address

8801 Hunter's Lake Dr.

Suite, Apt. #, etc.

Apt # 711

Suite, Apt. #, etc.

Opt. # 711

City & State

Tampa FL

City & State

Tampa FL

Zip

33647

Country

Zip

33647

Country

4. FEI Number

59-3749764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

UPCHURCH, JAMES E

9208 HIGHLAND RIDGE WAY
TAMPA FL 33647

7. Name and Address of New Registered Agent

Name

Upchurch, James E.

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

8801 Hunter's Lake Dr.

Apt. # 711

City

Tampa

FL

Zip Code

33647

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 | <input type="checkbox"/> Delete |
| NAME | UPCHURCH, JAMES E | |
| STREET ADDRESS | 9208 HIGHLAND RIDGE WAY | |
| CITY-ST-ZIP | TAMPA FL 33647 | |
| 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 | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|-------------------------------|--|
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | 8801 Hunter's Lake Dr. | |
| CITY-ST-ZIP | Apt. # 711 Tampa, FL 33647 | |
| 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 | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: James E. Upchurch **1/20/02 813/907-0395**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)