2002 UNIFORM BUSINESS REPORT (UBR)

P01000115187 **DOCUMENT#**

1. Entity Name

REYNOLDS NEXCLICK, INC.

Principal Place of Business 1284 ST ALBANS LOOP

LAKE MARY FL 32779

Mailing Address

1284 ST ALBANS LOOP LAKE MARY FL 32779



09-16-2002 90088 041 ***150.00



2. Principal Place of Business			3. Mailing Address				-				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4.	FEI Number EIN = 59-375764			Applied For	<u></u>
Zip - +	Zip Country		Zip	Country		.5.	Certificate of Status Desired		\$8.75 A	dditional ed	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
	OS, CLINT			Name Street Address (P.O. Box Number is Not Acceptable)]	
	albans loop Ry FL 32779										
					City	FL Zip Code					-
8. The above the obliga	named entity submits this stions of registered agent.	tatement for the	e purpose of changing its	register	ed office or regi	stered ag	gent, or both, in the State of Florid	a. Iam	familiar with	, and accept	
SIGNATURE	Signature, typed or printed name of re	gistered agent and t	tle if applicable. (NOTE	: Registere	d Agent signature req	uired when r	einstating)	DATE			
			FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750. Make Check Payable to Department of State				10. Election Campaign Finance Trust Fund Contribution.	ing C	\$5.0 Adde	00 May Be d to Fees	
11.	OFFic	CERS AND DIR	ECTORS	12.		ΑE	DITIONS/CHANGES TO OFFICE	RS AND	DIRECTOR	RS IN 11	┪
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD REYNOLDS, CLINT 1284 ST ALBANS LOO LAKE MARY FL 32779	☐ Delete	NAMI STRE	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	CR2E034 (4/02)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD REYNOLDS, JENNIFER 1284 ST ALBANS LOOI LAKE, MARY, FL 32779	P:	☐ Delete					- National Police	Change	Addition	CR
TITLE NAME STREET ADDRESS CITY-ST-ZIP		~ 1 ~ ~ ~	☐ Delete						☐ Change	☐ Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1				☐ Change	☐ Addition	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		i i		V		☐ 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

Addition

Reynolds Nexclick, Inc.

1284 St. Albans Loop Lake Mary, Fl. 32746 PH 407-333-0043 FX 407-333-7356

September 12, 2002

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

To whom it may concern,

Enclosed is a copy of document # P01000115187 (UBR) and a check in the amount of \$150.00. Please note we did not receive any prior notice. If any additional information should be needed please feel free to call us. Thank you for your time in this matter.

Sincerely,

Jennifer Reynolds, VTD