2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000115905

DOCUMENT # 1. Entity Name



FILED May 02, 2003 8:00 am Secretary of State
05-02-2003 90378 005 ***150.00

STREET ADDRESS CITY-ST-ZIP HOOVER AL 35244 TITLE VPST DELLINGER, LANNY STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ADDRESS CI	JLD COM	MUNICATIONS, INC.			7) 			
Surie, Apt. #, etc.	2828 CHARMONT DRIVE		3940 MONTCLAIR RD #201		1 10 1 10 11 11 11 11 11 11 11 11 11 11			
City & State Ci	2. Principal Place of Business		3. Mailing Address					
Zip Country Zip Country 5. Certificate of Status Desired	Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent T. Name and Address of New Registered Agent Name DELLINGER, LANNY 2828 CHARMONT DRIVE APOPKA FL 32703 S. The above named entity sucmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligators of registered agent agent set that accidence. OMTH: Registered Agent Ag	City & State		City & State		4. FEI Number 90-00066	no mareon		
DELLINGER, LANNY 2828 CHARMONT DRIVE APOPKA FL 32703 City FL Zip Code S. 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. I am farm liar with, and accept the obligations of registered agent, when or prent rame of registered agent act to it accidants. POTE: Registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligations of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligation of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligation of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligation of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligation of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligation of registered agent, or both, in the State of Florida. I am farm liar with, and accept the obligation of registered agent, or both, in the State of	Zip	Country	Zip	Country	5. Certificate of Status Desir		75 Additional	
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

