8/2?

FILED
Sep 08, 2002 8:00 am
Secretary of State
08-27-2002 90117 013 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000118620

1. Entity Name
L&J LIST SERVICES, INC.

Principal Place of Business	Mailing Address
2656 YARMOUTH LN. TALLAHASSEE FL 32309	2656 YARMOUTH LN. TALLAHASSEE FL 32309

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9089 Centerville Road	9089 Centerville Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee Florida	City & State: Tallahassee, Florida
Zip: 32309 Country: Leon	Zip: 32309 Country: Leon

4. FEI Number 47-0886266 ☒ Applied For ☐ Not Applicable

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
PERKINS, GARY E 2656 YARMOUTH LN. TALLAHASSEE FL 32309	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. I am familiar with, and accept the obligations of registered agent.

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 $550.00
After September 13, 2002 Fee will be $750.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERKINS, GARY E ~~2656 YARMOUTH LN.~~ 9089 Centerville Road TALLAHASSEE FL ~~32309~~ 32309 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (4/02)

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] Gary E. Perkins 8-26-02 893-5150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

All Clear

[redacted]

Florida Department of State #P01000118620
Division of Corporations
Uniform Business Report

Dear Sir(s):

Please be advised that I did not receive the first notice due to relocation and change of address. As such, L&J List Services, Inc. is submitting the original $150.00 filing fee and ask that the address change to 9089 Centerville Road, Tallahassee Florida 32309 be updated & reflected in your records.

Your assistance in this matter is greatly appreciated.

Sincerely,

Mary [redacted]