

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P01000121264

1. Entity Name

PROLIFIC CONCEPTS, INCORPORATED



FILED

04 FEB -9 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

RT.9. LITTLE ROAD
LAKE CITY FL 32024

Mailing Address

PO BOX 3754
LAKE CITY FL 32056

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
59-3761307

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

BOHLSCHIED, KEN S
RT 9 LITTLE ROAD
767
LAKE CITY FL 32056

Name

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

200025561482
12/17/03--01058--010 **550.00

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME BOHLSCHIED, JERI L
STREET ADDRESS RT. 9 LITTLE ROAD, #767
CITY-ST-ZIP LAKE CITY FL 33024

TITLE EXPV ☐ Delete
NAME BOHLSCHIED, KEN
STREET ADDRESS RT. 9 LITTLE ROAD, #767
CITY-ST-ZIP LAKE CITY FL 33024

TITLE S ☐ Delete
NAME ROCCO, RUSS
STREET ADDRESS POST OFFICE BOX 2242
CITY-ST-ZIP LAKE CITY FL 33056

TITLE AVP ☒ Delete
NAME BRATTIN, BOB
STREET ADDRESS POST OFFICE BOX 1061
CITY-ST-ZIP LAKE CITY FL 32056

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☒ Change ☐ Addition
NAME KEN BOHLSCHIED
STREET ADDRESS RT 9 BOX 767 LITTLE ROAD
CITY-ST-ZIP LAKE CITY FL 32024

TITLE VICE PRES ☒ Change ☐ Addition
NAME JERI L BOHLSCHIED
STREET ADDRESS RT 9 BOX 767 LITTLE ROAD
CITY-ST-ZIP LAKE CITY FL 32024

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

KEN BOHLSCHIED PRES 11-01-03 386-754-5745

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)