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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

55054016

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000023459

1. Entity Name
J A FINANCE COMPANY

Principal Place of Business	Mailing Address
1566 OLD DIXIE HIGHWAY VERO BEACH, FL 32960	1566 OLD DIXIE HIGHWAY VERO BEACH, FL 32960

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
885 US Hwy 1	*885 US Hwy 1*
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State *Vero Beach FL*	City & State *Vero Beach FL*
Zip *32960* Country *IRC*	Zip *32960* Country *IRC*

4. FEI Number *01-0629322* — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

7. Name and Address of New Registered Agent

Name *Gerald Arsenault*
Street Address (P.O. Box Number is Not Acceptable) *885 US #1*
City *Vero Beach* FL Zip Code *32960*

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 *Arleen Arsenault* *Gerald Arsenault* DATE *8/4/03*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR's $61.25
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PTD ☐ Delete	TITLE	☑ Change ☐ Addition
NAME	ARSENAULT, GERALD	NAME	*Arsenault, Gerald*
STREET ADDRESS	1566 OLD DIXIE HIGHWAY	STREET ADDRESS	*236 Live Oak Dr.*
CITY-ST-ZIP	VERO BEACH, FL 32960	CITY-ST-ZIP	*Vero Beach FL 32963*
TITLE	SVD ☐ Delete	TITLE	☑ Change ☐ Addition
NAME	ARSENAULT, ARLEEN	NAME	*Arleen Arsenault*
STREET ADDRESS	1566 OLD DIXIE HIGHWAY	STREET ADDRESS	*236 Live Oak Dr.*
CITY-ST-ZIP	VERO BEACH, FL 32960	CITY-ST-ZIP	*Vero Beach FL 32963*
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	[illegible]
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (10/02)

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: *Arleen Arsenault* *8/4/03* *(772) 299-3339*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #