2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P02000024005

1. Entity Name

JESSICA CORPORATION



Apr 04, 2003 8:00 am Secretary of State 04-04-2003 90071 001 ***158.75 **FILED**

,	COM CHANCIA										
Principal Place of Business 6635 WILLOW PARK DRIVE NAPLES FL 34109			Mailing Address 6635 WILLOW PARK DRIVE NAPLES FL 34109				FIE	8218 5 6 181 86118 8881	EL au ria ha isa sa ira a	BIID SEDDI DIDDI ODIN	6 04 (0
2. Principal F	Place of Business	3. Ma	iling Address								
Suite, Apt.	. #, etc.	Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Stat	te	City	City & State				4. FEI Number Applied For				
Zip	Country	Zip	Zip Count			5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name and Address of Curre						7. Name a	nd Address of	New Registere		~
	G, HEYWARD B BBLE CREEK COURT #104 FL 34110					EYWY ddress (P. 2090	HRO I O. Box Num VAJIA	ber is Not Acc	eling eptable #201		
			IRON	omne LALES FL 1992/2							
8. The above the obligate SIGNATURE	e named entity submits this statement tions of registered agent. Signatury hyped of printed name of registered age						d agent, or b		te of Florida. Ta		and accept
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department						1	Election Campa Trust Fund Con			00 May Be d to Fees
10.	OFFICERS AN	D DIRECTO	RS	11.			ADDITION	IS/CHANGES 1	O OFFICERS A	ND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIAMOND, DAVID B 6132 WEST PORT LANE NAPLES FL 34116		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		٠.			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DEANGELIS, JOHN M 2316 HARRIER RUN -NAPLES FL.31405		☐ Delete			John 2316	HARR	EANGERS ID. EUN L 31405		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STARLING, HEYWARD B 5145 COBBLE CREEK COURT NAPLES FL 34110	#104	☐ Delete			VP/ Heyu 1009	SECRE DARD E O VALI		9 #201 FZ 3	Change 33913	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	8	et address St-Zip		, , , , , , , , , , , , , , , , , , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete		:T Address St-Zip					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP			☐ Delete	CITY-	T ADDRESS ST-ZIP	•		-	Þ.	☐ Change	Addition
of the cor	certify that the information supplied wi on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address	is true and a powered to a	accurate and that my execute this report a	y signati .s requir	ire shall ha	ave the ear	ne legal off	act ac if made :	under noth: that	I am an officer	or director

SIGNATURE:

4-1-03