

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-08-2003 90091 020 ***150.00

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2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000033741	
1. Entity Name VERSALUTIONS, INC.	
Principal Place of Business 12269 CASHEROS COVE DRIVE SS. JACKSONVILLE, FL 32225	Mailing Address 12269 CASHEROS COVE DRIVE SS. JACKSONVILLE, FL 32225
2. Principal Place of Business	3. Mailing Address
State, Apt. #, etc.	State, Apt. #, etc.
City & State	City & State
Zip	Country
4. FEI Number 01-0651305 Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEVENS, JOHN P CPA C/O STEVENS, POWELL & COMPANY, P.A. 8382 BAYMEADOWS ROAD, SUITE 2 JACKSONVILLE, FL 32256	
7. Name and Address of New Registered Agent 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 <i>John P. Stevens</i> John P. Stevens 4-2-03 DATE	
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 11	
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 included 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 007, 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 <i>Robert E. Rader</i> Robert E. Rader 4-2-03 904-696-8696 DATE	