

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

02-24-2003 90228 025 ***150.00

DOCUMENT # P02000045192

1. Entity Name
THIS-N-THAT ENTERPRISES, INC.



Principal Place of Business
**5020 MAHOGANY RUN
SARASOTA FL 34241**

Mailing Address
**5020 MAHOGANY RUN
SARASOTA FL 34241**



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
4982 Brookmeade Drive
Suite, Apt. #, etc.

3. Mailing Address
4411 Bee Ridge Rd.
Suite, Apt. #, etc.
#267

City & State
Sarasota FL

City & State
Sarasota FL

4. FEI Number
03-0433863

Applied For
Not Applicable

Zip
34232 Country
USA

Zip
34233 Country
USA

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

6. Name and Address of Current Registered Agent

**JONSEF, TODD A
5020 MAHOGANY RUN
SARASOTA FL 34241**

7. Name and Address of New Registered Agent

Name
Todd A. Jonset
Street Address (P.O. Box Number is Not Acceptable)
4982 Brookmeade Drive
City
Sarasota FL Zip Code
34232

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
02/08/03

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D JONSEL, TODD A
5020 MAHOGANY RUN
SARASOTA FL 34241** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D JONSEF, TODD A.
4982 BROOKMEADE DRIVE
SARASOTA, FL 34232** ☒ Change ☐ Addition

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

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

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

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

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

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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE
02/08/03 941-726-2824

CR2E034 (10/02)