

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90083 004 ***150.00

0139719 AT

DOCUMENT # P02000045754

1. Entity Name

JIM BRANNON CUSTOM CARPENTRY, INC.



Principal Place of Business

**4500-A GULF DRIVE
HOLMES BCH FL 34217**

Mailing Address

**4500-A GULF DRIVE
HOLMES BCH FL 34217**

2. Principal Place of Business

308 60th Street

3. Mailing Address

308 60th Street

Suite, Apt. #, etc.

B

Suite, Apt. #, etc.

B

City & State

Holmes Beach

City & State

Holmes Beach

Zip

34217

Country

USA

Zip

34217

Country

USA

4. FEI Number

02-0584003

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

BRANNON, JAMES

4500-A GULF DRIVE 308-B 60th Street

HOLMES BCH FL 34217

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

(Signature)

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 **DPST** ☐ Delete
NAME **BRANNON, JAMES**
STREET ADDRESS **4500-A GULF DRIVE 308 B 60th Street**
CITY-ST-ZIP **HOLMES BCH FL 34217**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

(Signature)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment # 80138847

August 12, 2003

Florida Department of State
Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Document# P02000045754

Sir or Madam,

This was the first notification that I have received. I am requesting that the late fee be waived.

I am enclosing a money order in the original filing fee amount of one hundred fifty dollars (\$150.00).

Thank you,

James Brannon
Jim Brannon Custom Carpentry, Inc.
308 B 60th Street
Holmes Beach, FL 34217