

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90054 040 ***150.00

DOCUMENT # P02000053163

1. Entity Name
1ST EXS OF FLORIDA, INC.



Principal Place of Business
**815B MOODY RD
PALATKA FL 32177**

Mailing Address
**815B MOODY RD
PALATKA FL 32177**

2. Principal Place of Business
3900-C-111 AVE.

3. Mailing Address
SAME

Suite, Apt. #, etc.
Unit -4

Suite, Apt. #, etc.

City & State
Palatka

City & State

Zip
321

Country
USA

Zip
32177

Country

4. FEI Number
42-1535230

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

**-MANSON, DOROTHY
815B MOODY RD
PALATKA FL 32177**

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 **Dorothy A. Manson**

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/08/03

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 ☐ Delete
NAME **D**
STREET ADDRESS **MANSON, DOROTHY**
CITY-ST-ZIP **815B MOODY RD
PALATKA FL 32177**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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: **DOROTHY A. MANSON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/08/03 383-329-1130

Date Daytime Phone #

CR2E034 (4/03)

attachment



of Florida

80146861

#P02000053163

3902-4 Crill Ave..
Palatka, Fl. 32177

Florida Department of State
Division of Corporations

RE: Uniform Business Report

We have moved our business and this notice just caught up with us. I now realize we should have filed this earlier, but being a new corporation I ~~did not~~ know when to expect it. I am sending you the \$150.00 renewal fee in the hopes that you will accept my error.

Sincerely,

A handwritten signature in cursive script that reads 'Dottie Manson'.

Dottie Manson
President
1st EXS of Florida