

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90097 036 ***150.00

DOCUMENT # P02000094568

1. Entity Name
J. LYNN SPORTS & ENTERTAINMENT GROUP, INC.



Principal Place of Business
**6001 WESTGATE DRIVE
#2124
ORLANDO FL 32835**

Mailing Address
**6001 WESTGATE DRIVE
#2124
ORLANDO FL 32835**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
#2124

Suite, Apt. #, etc.
#2124

City & State
Orlando, FL

City & State
Orlando, FL

Zip
32835

Zip
32835

Country

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

Applied For
☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIAMS, EVA J
6001 WESTGATE DRIVE
#2124
ORLANDO FL 32835**

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

(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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
WILLIAMS, EVA J
6001 WESTGATE DRIVE #2124
ORLANDO FL 32835**

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
FLOYD, RAQUEL
320 MAGNOLIA AVE. SUITE A-1
ORLANDO, FL 32801**

☐ Delete

TITLE
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CITY-ST-ZIP
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☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/03

321-695-1385

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

80147565
#D02000094568

J. Lynn Sports and Entertainment Group, INC

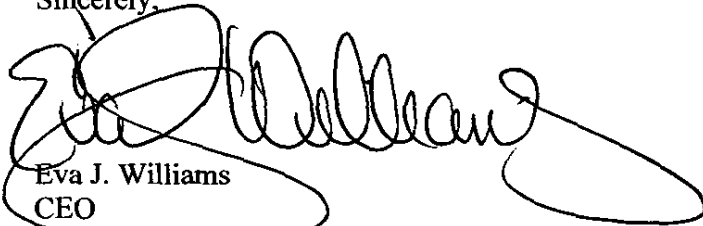
6001 Westgate Drive #2124 Orlando, FL 32835 321-695-1385

September 5, 2003

To: Florida Department of State, Division of Corporations;

This letter is to inform you that J. Lynn Sports and Entertainment Group, INC did not receive prior notice of filling fees. I have included a \$150.00 Check that will cover the original filling fees.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read 'Eva J. Williams', is written over the printed name and title.

Eva J. Williams
CEO

J. Lynn Sports and Entertainment Group, INC.