

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90116 024 ***150.00

DOCUMENT # P02000096907	
1. Entity Name THE SAMPSON GROUP, INC.	

Principal Place of Business 2415 KELLOW CIRCLE JACKSONVILLE FL 32216	Mailing Address 3100 UNIVERSITY BLVD SUITE 101 JACKSONVILLE FL 32216
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2. Principal Place of Business 9138 Mornington Drive Suite, Apt. #, etc.	3. Mailing Address 9138 Mornington Drive Suite, Apt. #, etc.
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City & State Jacksonville, FL	City & State Jacksonville, FL
Zip 32257	Country USA

4. FEI Number 05-0532096	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
MCINTYRE, ROD K SR 3100 UNIVERSITY BLVD. SUITE 101 JACKSONVILLE FL 32216	

7. Name and Address of New Registered Agent	
Name: Joseph Samples	
Street Address (P.O. Box Number is Not Acceptable): 9138 Mornington Drive	
City: Jacksonville	FL Zip Code: 32257

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: <u>Joseph Samples, President</u>	DATE: <u>2-1-03</u>

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
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10. OFFICERS AND DIRECTORS	
TITLE: <u>President, Secretary, & Treasurer</u>	☐ Delete
NAME: <u>Joseph Samples</u>	
STREET ADDRESS: <u>9138 Mornington Drive</u>	
CITY-ST-ZIP: <u>Jacksonville, FL 32257</u>	
TITLE: <u>Vice President</u>	☐ Delete
NAME: <u>Maurice Samples, Jr.</u>	
STREET ADDRESS: <u>2415 Kellow Circle</u>	
CITY-ST-ZIP: <u>Jacksonville, FL 32216</u>	
TITLE: <u></u>	☐ Delete
NAME: <u></u>	
STREET ADDRESS: <u></u>	
CITY-ST-ZIP: <u></u>	
TITLE: <u></u>	☐ Delete
NAME: <u></u>	
STREET ADDRESS: <u></u>	
CITY-ST-ZIP: <u></u>	
TITLE: <u></u>	☐ Delete
NAME: <u></u>	
STREET ADDRESS: <u></u>	
CITY-ST-ZIP: <u></u>	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: <u>President, Secretary, & Treasurer</u>	☐ Change ☒ Addition
NAME: <u>Joseph Samples</u>	
STREET ADDRESS: <u>9138 Mornington Drive</u>	
CITY-ST-ZIP: <u>Jacksonville, FL 32257</u>	
TITLE: <u>Vice President</u>	☐ Change ☒ Addition
NAME: <u>Maurice Samples, Jr.</u>	
STREET ADDRESS: <u>2415 Kellow Circle</u>	
CITY-ST-ZIP: <u>Jacksonville, FL 32216</u>	
TITLE: <u></u>	☐ Change ☐ Addition
NAME: <u></u>	
STREET ADDRESS: <u></u>	
CITY-ST-ZIP: <u></u>	
TITLE: <u></u>	☐ Change ☐ Addition
NAME: <u></u>	
STREET ADDRESS: <u></u>	
CITY-ST-ZIP: <u></u>	
TITLE: <u></u>	☐ Change ☐ Addition
NAME: <u></u>	
STREET ADDRESS: <u></u>	
CITY-ST-ZIP: <u></u>	

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.	
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SIGNATURE: <u>Joseph Samples</u>	DATE: <u>2-1-03</u>	DAYTIME PHONE #: <u>904-731-2473</u>
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CR2E034 (10/02)