

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90143 030 ***150.00

DOCUMENT # P02000105934

1. Entity Name
J.F. PLUMMER, INC.



Principal Place of Business
12 SOUTH MAIN ST.
WILLISTON FL 32696

Mailing Address
12 SOUTH MAIN ST.
WILLISTON FL 32696



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

119 MARION Oaks Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ocala, FL

City & State

Zip

34473

Country

USA

4. FEI Number

11-3678088

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YARDLEY, THOMAS H
1970 MICHIGAN AVE., STE. D
COCOA FL 32922-5723

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 D ☒ Delete
NAME PLUMMER, JOSEPH F
STREET ADDRESS 3619 N.W. 40TH ST.
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE President ☐ Delete
NAME Ava Plummer
STREET ADDRESS 7311 NE HWY 41
CITY-ST-ZIP Williston FL 32696

TITLE Vice-President ☐ Delete
NAME MAAR Plummer
STREET ADDRESS PO Box 214/11049 NW ST. RD. 20
CITY-ST-ZIP BUNNELL, FL 32321

TITLE Treasurer ☐ Delete
NAME Paula Yardley
STREET ADDRESS 1235 Samsen Rd
CITY-ST-ZIP Cocoa Beach, FL 32931

TITLE Director ☐ Delete
NAME Timothy Agree
STREET ADDRESS 3521 W. Dardodile Dr
CITY-ST-ZIP Beverly Hills, FL 34465

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
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/03

Date

Daytime Phone #

CR2E034 (10/02)