

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 14, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90081 048 \*\*\*150.00

DOCUMENT # P02000116748

1. Entity Name  
EARTH MASTERS, INC.



Principal Place of Business  
10535 LEM TURNER ROAD  
SUITE 108  
JACKSONVILLE FL 32218

Mailing Address  
10535 LEM TURNER ROAD  
SUITE 108  
JACKSONVILLE FL 32218



2. Principal Place of Business

6501 Arlington Exwy  
Suite, Apt. #, etc.  
B 200

3. Mailing Address

6501 Arlington Exwy  
Suite, Apt. #, etc.  
B 200

☐ CHECK HERE IF MAKING CHANGES

City & State  
Jacksonville, FL

City & State  
Jacksonville, FL

4. FEI Number  
04-3737841

Applied For  
Not Applicable

Zip  
32211

Country  
USA

Zip  
32211

Country  
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATTERSON, TERRA  
10535 LEM TURNER ROAD  
SUITE 108  
JACKSONVILLE FL 32218

867 Tortoise Way

Jacksonville, FL

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6501 Arlington Exwy

Suite B 200

City Jacksonville

FL

Zip Code 32218

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 DIXON, GEORGE  
STREET ADDRESS 10535 LEM TURNER ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE D ☒ Delete  
NAME ALLEN, STEPHEN  
STREET ADDRESS 10535 LEM TURNER ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE VD ☒ Delete  
NAME JONES, TONISA  
STREET ADDRESS 10535 LEM TURNER ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE PD ☐ Delete  
NAME PATTERSON, TERRA  
STREET ADDRESS 10535 LEM TURNER ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN-11

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

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

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

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

TITLE Vice President / Treasurer ☐ Change ☒ Addition  
NAME Alphonso Johnson  
STREET ADDRESS 10535 Lem Turner Road Ste 108  
CITY-ST-ZIP Jacksonville, FL 32218

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 REQUIRED

5/12/03

904-568-6901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)