## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #  1. Entity Name  JUMPING TIME INC.	P02000	117632 G		
Principal Place of Business 10299 WOOD DOVE WAY JACKSONVILLE FL 32221 US		Mailing Address 10299 WOOD DOVE WAY JACKSONVILLE FL 32221 US	,	—··
2. Principal Place of Business	3.	Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip Cou	ntry	Zìp	Count	гу
6. Name and Address of Current Registered Agent				
BLACKSHEAR, KATHRYN 10299 WOOD DOVE WAY JACKSONVILLE, FL 32221				Name Street Address (

☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent P.O. Box Number is Not Acceptable) City 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 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Addition BLACKSHEAR, KATHRYN R NAME NAME 10299 WOOD DOVE WAY STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32221 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME --NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

## attachment

Jumping Time Inc. 10299 Wood Dove Way Jacksonville, Florida 32221-3000 90151726 P02000117632

Attn: Florida Department of State

I am writing this letter on behalf of my company "Jumping Time Inc". I have completed and enclosed the 2003 Uniform Business Report. I called and was informed that because this was the first UBR I received, which indicates 60 day notice to type a letter and pay the normal \$150.00 fee. For future UBR I would like to enroll to receive them via email. My email address is KBLACKSH@attbi:com; I-can\*also-be-reached\*at\*(904)635-3533.

Thank You,

Kathryn Blackshear

President.