

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90306 041 ***150.00

DOCUMENT # P02000123538 1. Entity Name BOLD CITY PRINTING & DESIGN, INC.					
Principal Place of Business 1419 UNIVERSITY BOULEVARD NORTH JACKSONVILLE, FL 32211			Mailing Address 1419 UNIVERSITY BOULEVARD NORTH JACKSONVILLE, FL 32211		
2. Principal Place of Business 5839 Commerce Street		3. Mailing Address 5839 Commerce Street			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Jacksonville, FL		City & State Jacksonville, FL		4. FEI Number 06-1665560	
Zip 32211		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLLEY, LORENZO J 1419 UNIVERSITY BOULEVARD NORTH JACKSONVILLE, FL 32211			7. Name and Address of New Registered Agent Name Theodore R. Taylor Jr. Street Address (P.O. Box Number is Not Acceptable) 5839 Commerce Street City Jacksonville, FL Zip Code 32211		
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><i>Theodore R Taylor</i></u> DATE <u>April 21, 2003</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)					
FILE NOW!!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 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	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		P/D/C/M Theodore R. Taylor Jr. 5839 Commerce Street Jacksonville, FL 32211	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		V/T/S Lorenzo J. Holley 5839 Commerce Street Jacksonville, FL 32211	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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)(1), 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: <u><i>Theodore R Taylor</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>04/21/03</u> (904) 745-0616 Daytime Phone #		

CR2034 (10/02)