

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2003 8:00 am**  
**Secretary of State**

09-12-2003 90100 038 \*\*\*150.00

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**DOCUMENT # P02000133949**

1. Entity Name  
**MADRIN CORP.**



Principal Place of Business  
**8175 WEKIVA WAY  
JACKSONVILLE FL 32256  
US**

Mailing Address  
**8175 WEKIVA WAY  
JACKSONVILLE FL 32256  
US**



2. Principal Place of Business  
**11112 SAN JOSE BLVD.**

3. Mailing Address

Suite, Apt. #, etc.  
**SUITE 27**

Suite, Apt. #, etc.

City & State  
**JACKSONVILLE, FL**

City & State

Zip  
**32223**

Country  
**USA**

Zip

Country

4. FEI Number  
**30-0137728**

Applied For  
☐ Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KELLEY, STEVEN T  
8175 WEKIVA WAY  
JACKSONVILLE FL 32256**

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

*Steven T. Kelley*

(NOTE: Registered Agent signature required when reinstating)

**9/9/03**

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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  
**P/T/S  
STEVEN T. KELLEY  
8175 WEKIVA WAY  
JACKSONVILLE, FL 32256**

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

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

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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)(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:

*Steven T. Kelley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9/9/03**

Date

**904-262-6900**

Daytime Phone #

CR2E034 (4/03)



86147713  
Po2000133949

September 9, 2003

To whom it may concern:

Please find attached the first Uniform Business Report for Madrin Corp. This is the first year of this corporation's existence and no prior notice was received concerning this filing. As such, a check for \$150 is enclosed per the information found in the Frequently Asked Questions.

With regards,



Steven T. Kelley  
President  
Madrin Corp.