

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

05/02/03 90162 002 *150.00

DOCUMENT # P02000134236

1. Entity Name

RICHARD JEFFCOAT, INC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 FEB 23 AM 8:00

Principal Place of Business
13235 SE 100TH COURT
OCKLAWAHA FL 32179

Mailing Address
13235 SE 100TH COURT
OCKLAWAHA FL 32179

2. Principal Place of Business

13235 SE 110th Ct

3. Mailing Address

PO Box 744

Suite, Apt. #, etc.

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

MRS

City & State

Ocklawaha FL

City & State

Ocklawaha FL

4. FEI Number

57-1143134

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JEFFCOAT, SUSANNE
13235 SE 110TH COURT
OCKLAWAHA FL 32179

7. Name and Address of New Registered Agent

Name

Susanne Jeffcoat

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

13235 SE 110th Court

City

Ocklawaha

FL

Zip Code

32179

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

Susanne Jeffcoat

Susanne Jeffcoat T,S

2/19/04

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, 2004 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 P
NAME JEFFCOAT, RICHARD
STREET ADDRESS 13235 SE 110TH COURT
CITY-ST-ZIP OCKLAWAHA FL 32179

TITLE T,S
NAME JEFFCOAT, SUSANNE
STREET ADDRESS 13235 SE 100TH COURT
CITY-ST-ZIP OCKLAWAHA FL 32179

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T,S
NAME Susanne Jeffcoat
STREET ADDRESS 13235 SE 110th Ct
CITY-ST-ZIP Ocklawaha FL 32179

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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:

Susanne Jeffcoat

Susanne Jeffcoat T,S

2/19/04 352-427-1426

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #