

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90232 040 ***158.75

DOCUMENT # P28940

1. Entity Name

JOE MONEY MACHINERY CO., INCORPORATED

Principal Place of Business

**10009 RAYMAR ST.
PENSACOLA FL 32534**

Mailing Address

**P.O. BOX 7049
PENSACOLA FL 32534**

2. Principal Place of Business

1125 CHEMSTRAND ROAD

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CANTONMENT, FLORIDA

City & State

City & State

Zip

32533

Country

USA

Zip

Country

4. FEI Number

63-0251962

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCCOY, HERMAN R
4296 CHANTILLY WAY
MILTON FL 35283**

7. Name and Address of New Registered Agent

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.

SIGNATURE

Herman R. McCoy

Herman R. McCoy

4-29-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	MONEY, CHARLES S	
STREET ADDRESS	P.O. BOX 997	
CITY-ST-ZIP	BIRMINGHAM AL 35201	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MONEY, JAMES	
STREET ADDRESS	605 OAKLAND DRIVE	
CITY-ST-ZIP	MIDFIELD AL 35228	
TITLE	S	<input type="checkbox"/> Delete
NAME	MONEY, CLYDE	
STREET ADDRESS	1412 46TH ST. WEST	
CITY-ST-ZIP	BIRMINGHAM AL 35208	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	HUDSON, WAYNE	
STREET ADDRESS	12805 NECTUR 160	
CITY-ST-ZIP	CLEVELAND AL 35049	
TITLE	T	<input type="checkbox"/> Delete
NAME	MONEY, HELEN S	
STREET ADDRESS	3529 BELLE MEADE LN.	
CITY-ST-ZIP	BIRMINGHAM AL 35223	
TITLE	VPF	<input type="checkbox"/> Delete
NAME	BOX, RON	
STREET ADDRESS	P.O. BOX 997	
CITY-ST-ZIP	BIRMINGHAM AL 35201	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James W. McCoy
James W. McCoy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President
Vice President

Date

800-292-3491

Daytime Phone #

CR2E034 (9/01)