2002 UNIFORM BUSINESS REPORT (UBR)

P93000004824 DOCUMENT

SIGNATURE: _

J.L. REESE ENTERPRISES, INC.

FILED Jul 02, 2002 8:00 am Secretary of State 07-02-2002 90808 007 ***550.00

Principal Place of Business 2416 W. BAYSHORE GULF BREEZE FL 32561			Mailing Address 2416 W. BAYSHORE GULF BREEZE FL 32561			ļ, _ ·			171		
			1. (*) 1. ()								
2. Principal Place of Business			3. Mailing Address				E 100 1/00 1/10 10/00 SULLI DOLLI DOLLI DOLLI DOLLI BICHE PICHE HONO HAN BICH HACE				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4.	4. FEI Number 26-3370789			Applied For Not Applicable	
Zip		Country	Zip	itry	5. Certificate of Status Desired			\$8.75 Additional Fee Required			
	6. Name	and Address of Current Re	gistered Agent			7. Name and Address of New Registered Agent]
					Name				100		İ
REESE, J. 2416 W. B/			Street Addre			(P.O. E	Box Number is Not Acceptable)				1
GULF BRE		561						ž c	. 34 - 3	2.7	
				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											
0 This	in alia	ible to estisfy its Intensible	FILE NOW!	II FÉF	15° \$150 00						1
Tax filing re		rible to satisfy its Intangible and elects to do so.	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State				10. Election Campaign Fina Trust Fund Contribution.			00 May Be d to Fees	
11.		OFFICERS AND DI	DIRECTORS 12.				DDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTORS	S IN 11	1
	D		☐ Delete	TITL	E			,	☐ Change	Addition]
	REESE, J.			NAM	l l			· .		ii Ni	(9)
STREET ADDRESS 2416 W. BAYSHORE GULF BREEZE FL 32561				EET ADDRESS '-ST-ZIP					อั	CR2E034 (9/01)	
TITLE	GOEL DIRECTE LE 02001				Ε				☐ Change	☐ Addition	병
NAME			22 5000	NAM	IE .						
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP				-	'-ST-ZIP				Change		1
TITLE NAME			☐ Delete	TITL					□ Change	☐ Addition	
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CITY-ST-ZIP					r-St-ZIP						
13. I hereby o	certify that th	ne information supplied with the	nis filing does not qualify for	r the exe	emption stated in S	Section e same	119.07(3)(i), Florida Statutes. I I	further certi	fy that the ir	nformation or director	-
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 life empowered.											