2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000050058

Country

SUMMERALL, GEORGE

1216 COUNTY ROAD 29 LAKE PLACID FL 33852

9. This corporation is eligible to satisfy its Intangible

SUMMERALL, GEORGE

1216 COUNTY ROAD 29

SUMMERALL, BEVERLY

1216 COUNTY ROAD 29

Tax filing requirement and elects to do so.

LAKE PLACID FL

LAKE PLACID FL

(See criteria on back)

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

City & State

Zip

SIGNATURE

11.

TITLE

NAME

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

JOYNER'S CALADIUMS, INC. Principal Place of Business Mailing Address 1216 COUNTY ROAD 29 1216 COUNTY ROAD 29 LAKE PLACID FL 33852 LAKE PLACID FL 33852 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

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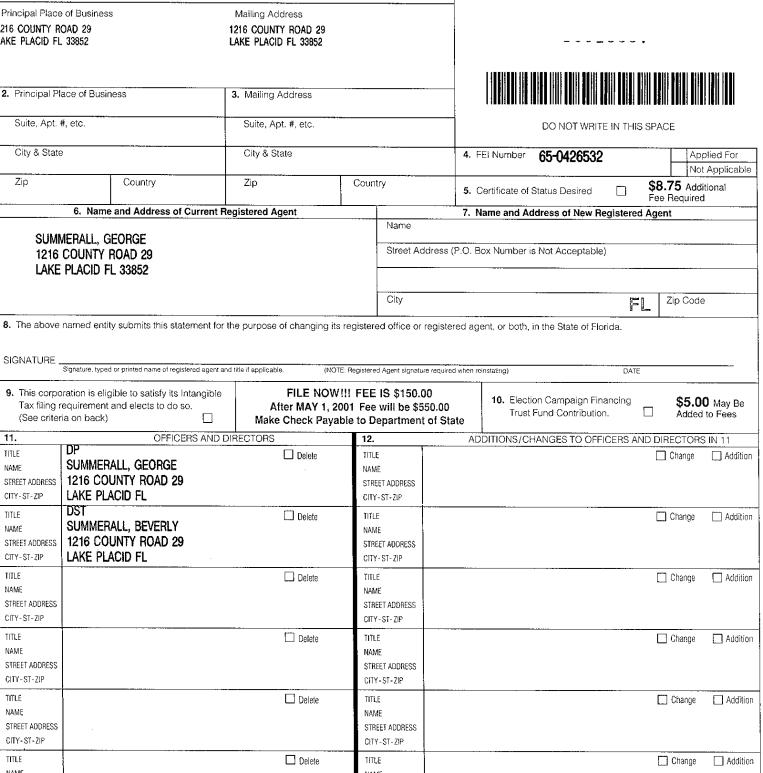
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City

Zip

Feb 28, 2001 8:00 am **Secretary of State**

02-28-2001 90071 004 ***150.00



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 of the true 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 of the true true and that my name appears in Block 11 or Block 12 if changed, or on an attachmen with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR