2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State
03-27-2002 90046 006 ***150.00

DOCUMENT # P93000080438

1. Entity Name
JAMES R. SCHMOOK, INC.

Principal Place of Business	Mailing Address
1100 S. DELANEY AVE. F-503 ORLANDO FL 32806-1257	1100 S. DELANEY AVE. F-503 ORLANDO FL 32806-1257

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
422 Sandpiper Ct	422 Sandpiper Ct
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Edgewater	City & State: Edgewater
Zip: 32141 Country:	Zip: 32141 Country:

4. FEI Number 95-3493435 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DOUGLAS, SANDRA
1100 S. DELANEY AVE.
F-503
ORLANDO FL 32806-1257

7. Name and Address of New Registered Agent

Name: Sandra Douglas King
Street Address (P.O. Box Number is Not Acceptable): 422 Sandpiper Ct
City: Edgewater FL Zip Code: 32141

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: Sandra D. King — DATE: 3-15-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SCHMOOK, JAMES R 18061 VERANO DR SAN DIEGO CA 92128 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 29355 WINDING BROOK DR MENIFEE, CA 92584
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST SCHMOOK, KAY G 18061 VERANO DR SAN DIEGO CA 92128 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 29355 WINDING BROOK DR MENIFEE, CA 92584
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Kay Schmook SEC/TREAS — 2/11/02 — (626)303-3058
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)