

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000081560

FILED
Apr 02, 2002 8:00 AM
Secretary of State

Entity Name: BILLY PENN, INC.

Current Principal Place of Business:

6940 STUART AVE
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

6940 STUART AVE
JACKSONVILLE, FL 32254 US

Current Mailing Address:

P O BOX 37982
JACKSONVILLE, FL 32202 US

New Mailing Address:

P O BOX 37982
JACKSONVILLE, FL 32236 US

FEI Number: 59-3210356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, LEE B I
6940 STUART AVE
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

JONES, LEE B I
6940 STUART AVE
JACKSONVILLE, FL 32254 US

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:

04/02/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPDS () Delete
Name: JONES, STEVEN C
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL

Title: PTD () Delete
Name: JONES, IV L
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPDS (X) Change () Addition
Name: JONES, STEVEN C
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL 32254

Title: PTD (X) Change () Addition
Name: JONES IV, LEE B
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL 32254

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE B JONES IV

P

04/02/2002

Electronic Signature of Signing Officer or Director

Date