


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

APPROVED
AND
FILED

03 AUG -5 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000012162	
1. Entity Name J.R. AND ASSOCIATES OF CENTRAL FLORIDA, INC.	

DO NOT WRITE IN THIS SPACE

900022661479
08/29/03--01013--027 **\$1.25

2. Principal Place of Business 1247 CORNERSTONE CT.	3. Mailing Address 1247 CORNERSTONE CT.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ORLANDO, FL	City & State ORLANDO, FL
Zip 32835	Zip 32835
Country USA	Country USA

2003 AMENDED

DO NOT WRITE IN THIS SPACE	4. FEI Number 59-3224675		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name JAMES R. BELL		
Street Address (P.O. Box Number is Not Acceptable) 1247 CORNERSTONE CT.			
City ORLANDO			
State FL			
Zip Code 32835			

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **JAMES R. BELL, VP** *James R Bell* **28 JULY 2003**
Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PATRICIA A. BELL 1247 CORNERSTONE CT. ORLANDO, FL 32835	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CHARLES L. BINKOWSKI 5435 W. WASHINGTON ST. ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD JAMES R. BELL 1247 CORNERSTONE CT. ORLANDO, FL 32835	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *James R Bell* **JAMES R. BELL** **28 JULY 2003** **(407)296-9663**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)