

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 05, 2000 8:00 am
Secretary of State

02-05-2000 90024 013 ***150.00

DOCUMENT # P94000030436

1. Entity Name

JUDGE ENTERPRISES, INC.

Principal Place of Business

801 DOUGLAS AVE.
SUITE 107
ALTAMONTE SPRINGS FL 32714
US

Mailing Address

801 DOUGLAS AVE.
SUITE 107
ALTAMONTE SPRINGS FL 32714-5206
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3239893

Applied For

Not Applied For

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JUDGE, RUSSELL F
765-215 CREEKWATER TER
LAKE MARY FL 32746

Name

RUSSELL F. JUDGE

Street Address (P.O. Box Number is Not Acceptable)

770-100 OAKLAND HILLS CIR

City

LAKE MARY

FL

Zip Code

32746

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

Russell F. Judge

RUSSELL F. JUDGE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/31/00

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, 2000 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

TITLE	D	<input type="checkbox"/> Delete
NAME	JUDGE, RUSSELL F	
STREET ADDRESS	765-215 CREEKWATER TER	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	D	<input type="checkbox"/> Delete
NAME	JUDGE, THOMAS H.	
STREET ADDRESS	321 WALL ST.	
CITY-ST-ZIP	PRINCETON NJ	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JUDGE, RUSSELL F.	
STREET ADDRESS	770-100 OAKLAND HILLS CIR.	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JUDGE, THOMAS H.	
STREET ADDRESS	168 FRANKLIN CORNER RD. BLDG 2 SUITE 200	
CITY-ST-ZIP	LAWRENCEVILLE, N.J. 08648	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Russell F. Judge
RUSSELL F. JUDGE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/31/00

Daytime Phone #

(407) 788-1770