## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Feb 16, 2001 8:00 am DOCUMENT # **P94000041371** Secretary of State 1. Entity Name THE VILLAGE JEWELER, INC. 02-16-2001 90021 002 \*\*\*150.00 Mailing Address Principal Place of Business 990 BICHARA BLVD. 990 BICHARA BLVD. LA PLAZA GRANDE S LA PLAZA GRANDE S LADY LAKE FL 32159 LADY LAKE FL 32159 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3242930 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARP, JIM D Street Address (P.O. Box Number is Not Acceptable) 990 BICHARA BLVD. LA PLAZA GRANDE S LADY LAKE FL 32159 Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITI F D Delete TITLE HARP, JIM D NAME NAME 990 BICHARA BLVD., LA PLAZA GRANDE S STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LADY LAKE FL 32159 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HARP, CAROLYN NAME 990 BICHARA BLVD., LA PLAZA GRANDE S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL 32159 Delete Change ☐ Addition TITLE TITLE HARP, SCOTT NAME NAME 990 BICHARA BLVD LA PLAZA GRANDE S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL ☐ Change ☐ Addition TITLE TITLE HARP, BRANDON NAME NAME 990 BICHUA BLVD LA PLAZA GRANDE S. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

13. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR