

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000079042

1. Entity Name

JDKELM, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90878 017 ***150.00

Principal Place of Business

Mailing Address

5798 SHADY BROOK WAY
 SARASOTA FL 34243

5798 SHADY BROOK WAY
 SARASOTA FL 34243-4847

2. Principal Place of Business

14719 7th Avenue East

3. Mailing Address

14719 7th Avenue East

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Bradenton Florida

City & State

Bradenton Florida

4. FEI Number

65-0541015

Applied For

Not Applicable

Zip

Country

34202-2915

USA

Zip

Country

34202-2915

USA

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

BAKER, DIANA L
 5798 SHADY BROOK WAY
 SARASOTA FL 34243

Name

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

14719 7th Avenue East

City

Bradenton FL

FL

Zip Code

34202-2915

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

Diana L. Baker Diana L. Baker - Vice-President

4/28/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PDT	<input type="checkbox"/> Delete
NAME	BAKER, JAMES E	
STREET ADDRESS	5798 SHADY BROOK WAY	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VDS	<input type="checkbox"/> Delete
NAME	BAKER, DIANA L	
STREET ADDRESS	5798 SHADY BROOK WAY	
CITY-ST-ZIP	SARASOTA FL	
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	PDT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Baker, James E.	
STREET ADDRESS	14719 7th Avenue East	
CITY-ST-ZIP	Bradenton FL 34202-2915	
TITLE	VDS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Baker, Diana L.	
STREET ADDRESS	14719 7th Avenue East	
CITY-ST-ZIP	Bradenton FL 34202-2915	
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:

Diana L. Baker Diana L. Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00

Date

(941) 749-6258

Daytime Phone #