

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2002 8:00 am
Secretary of State

07-23-2002 90334 033 ***500.00
 08-04-2002 90161 023 ****50.00

DOCUMENT # P95000007504

1. Entity Name
E. J.'S BACKHOE, INC.

Principal Place of Business
**767 BLANDING BLVD
 SUITE 101
 ORANGE PARK FL 32065**

Mailing Address
**767 BLANDING BLVD
 SUITE 101
 ORANGE PARK FL 32065**

2. Principal Place of Business
1961 CR 209B
 Suite, Apt. #, etc.

3. Mailing Address
1961 CR 209B
 Suite, Apt. #, etc.

City & State
GREEN COVE SPS FL
 Zip
32043
 Country
CLAY

City & State
GREEN COVE SPS FL
 Zip
32043
 Country
CLAY

4. FEI Number
59-3295416

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**DEPRATTER, JUDITH J
 767 BLANDING BLVD
 SUITE 101
 ORANGE PARK FL 32065**

7. Name and Address of New Registered Agent

Name
JUDITH J DEPRATTER
 Street Address (P.O. Box Number is Not Acceptable)
1961 CR 209B
GREEN COVE SPS
 City
GREEN COVE SPS FL Zip Code
32043

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
 NAME
DEPRATTER, JUDITH J ☐ Delete
 STREET ADDRESS
767 BLANDING BLVD SUITE 101
 CITY-ST-ZIP
ORANGE PARK FL 32065

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
JUDITH J DEPRATTER ☐ Change ☐ Addition
 NAME
JUDITH J
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

CR2034 (4/02)

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: **JUDITH J DEPRATTER**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/02
 Date

Daytime Phone #