

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90420 035 ***150.00

DOCUMENT # P95000038552

1. Entity Name
JAMES P. LYON & SONS, INC.

Principal Place of Business

~~4980 SW 52 ST~~
~~STE 105~~
~~DAVIE FL 33314~~
~~US~~

Mailing Address

~~4980 SW 52 ST~~
~~STE 105~~
~~DAVIE FL 33314~~
~~US~~

2. Principal Place of Business

807 NW 57 ST
 Suite, Apt. #, etc.

3. Mailing Address

807 NW 57 ST
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Ft Lauderdale
33309
USA

City & State

Ft Lauderdale
33309
USA

4. FEI Number

65-0600702

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LYON, JAMES P

4980 SW 52 ST

STE 420

DAVIE FL 33314

7. Name and Address of New Registered Agent

Name

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

807 NW 57 ST

Ft Lauderdale

FL

Zip Code

33309

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

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, 2002 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 ☐ Delete
NAME PD
STREET ADDRESS LYON, JAMES P
CITY-ST-ZIP 4980 SW 52 ST STE 105
 DAVIE FL

TITLE ☐ Delete
NAME S
STREET ADDRESS LYON, JAMES P
CITY-ST-ZIP 4980 SW 52 ST STE 105
 DAVIE FL 33314

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
TITLE
NAME 807 NW 57 ST
STREET ADDRESS Ft Land FL 33309
CITY-ST-ZIP

☒ Change ☐ Addition
TITLE
NAME 807 NW 57 ST
STREET ADDRESS Ft Land FL 33309
CITY-ST-ZIP

☐ Change ☐ Addition
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STREET ADDRESS
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☐ Change ☐ Addition
TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James P. Lyon

Date

Daytime Phone #

4-8-02 954 5103413

CR2E034 (9/01)