

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000073958

1. Entity Name

J.D. CHIPS, INC.

FILED

Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90148 048 ***150.00

Principal Place of Business

10230 ATLANTIC BLVD.
#10
JACKSONVILLE FL 32225

Mailing Address

10230 ATLANTIC BLVD.
#10
JACKSONVILLE FL 32225-0725

2. Principal Place of Business

10230 ATLANTIC BLVD.

Suite, Apt. #, etc. #11

3. Mailing Address

10230 ATLANTIC BLVD.

Suite, Apt. #, etc. #11

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

Zip

32225

Country

Zip

32225

Country

4. FEI Number

59-3335623

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS, JOHN D III
10230 ATLANTIC BLVD.
#10
JACKSONVILLE FL 32225

7. Name and Address of New Registered Agent

Name JOHN D. DOUGLAS, III
Street Address (P.O. Box Number is Not Acceptable)
10230 ATLANTIC BLVD.
#11
City JACKSONVILLE FL Zip Code 32225

(NOTE:
ADDRESS
CHANGE
ONLY)

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

John D. Douglas III

JOHN D. DOUGLAS III PRESIDENT

12 JAN 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

TITLE PTD ☐ Delete
NAME DOUGLAS, JOHN D III
STREET ADDRESS 3131 UNIVERSITY BLVD., NORTH, APT. 26
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE VSD ☐ Delete
NAME PARKER, WINSOR W JR.
STREET ADDRESS 3540 HIDDEN LAKE DRIVE EAST
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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

TITLE (ADDRESS CHANGE ONLY) ☒ Change ☐ Addition
NAME
STREET ADDRESS 7701 TIMBERLIN PARK BLVD. #118
CITY-ST-ZIP JACKSONVILLE, FL 32256

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

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

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

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

TITLE ☐ Change ☐ 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:

WINSOR W. PARKER, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 JAN 99

Date

904.720.0774

Daytime Phone #