

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91419 018 ***150.00

DOCUMENT # P95000087584

1. Entity Name

J & J AUTO TRANSPORT, INC.



Principal Place of Business
4843 MAPLEWOOD COURT
CALLAHAN FL 32011

Mailing Address
4843 MAPLEWOOD COURT
CALLAHAN FL 32011

Cr. adv. rec.



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3345976

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

✓ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, JOHNNIE L
4843 MAPLEWOOD COURT
CALLAHAN FL 32011

Name

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

City

FL

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
MILLER, JOHNNIE L
4843 MAPLEWOOD COURT
CALLAHAN FL 32011 ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
S
THORNTON, JUDITH A
4843 MAPLEWOOD COURT
CALLAHAN FL 32011 ☐ Delete

TITLE
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☐ Change ☐ Addition

12. 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 10 or Block 11 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

Date

Daytime Phone #

Judith A. Thornton 4-29-03

CR2E034 (10/02)

P.O. Box 1990
Yulee, FL 32041

April 21, 2003

new house number

**EFFECTIVE IMMEDIATELY
YOUR STREET ADDRESS HAS BEEN CHANGED AS FOLLOWS:**

Recipient name & CURRENT address:

**MILLER/THORNTON
4843 MAPLEWOOD CT
CALLAHAN, FL 32011**

The NEW street address for your structure on
MAPLEWOOD CT is:

44316 MAPLEWOOD CT

*Please Note: This is your STREET address.
This does NOT affect delivery of mail to a P.O. box.*

The Nassau County Sheriff's 9-1-1 Mapping and Addressing Department is in the process of readdressing Callahan. This 9-1-1 Program was implemented to assist emergency personnel to easily locate your structure in an emergency situation.

THIS IS YOUR NEW 9-1-1 STREET AND MAILING ADDRESS. HOWEVER, IF USING A POST OFFICE BOX YOUR MAILING ADDRESS WILL NOT CHANGE. DISREGARD ANY PREVIOUS NOTICES YOU MAY HAVE RECEIVED. PLEASE CONTACT OUR OFFICE TO CONFIRM THIS INFORMATION. PLEASE NOTIFY YOUR TELEPHONE COMPANY OF THIS ADDRESS CHANGE, WHICH WILL ASSIST EMERGENCY SERVICES IN LOCATING YOUR STRUCTURE.

The above address is permanent for this location. You should begin to use this address immediately. It is your responsibility to inform your correspondents of this change using form 3576 cards available at any Post Office.

Mail sent to your old address will continue to be delivered for a period of 6 months. After this time the old address will be removed from the United States Postal Service database. The county addressing ordinance requires that you put your new address number on the structure as soon as possible.

The 9-1-1 Program is a very worthwhile project, designed to protect the health and welfare of our citizens. Every effort has been made to ensure the address above is for your structure. Please carefully review the map below to ensure the information is correct.

PLEASE CONTACT THE NASSAU COUNTY SHERIFF'S 9-1-1 MAPPING/ADDRESSING DEPARTMENT AT THE NUMBER BELOW TO VERIFY THAT YOUR ADDRESS IS CORRECT IN OUR SYSTEM.

Addressing Authority:

Nassau County Sheriff's Office (904-879-0911)

**US Postal Service
Callahan Postmaster**

*****NASSAU COUNTY SHERIFF'S OFFICE*****

DEPUTY 911 COORDINATOR:

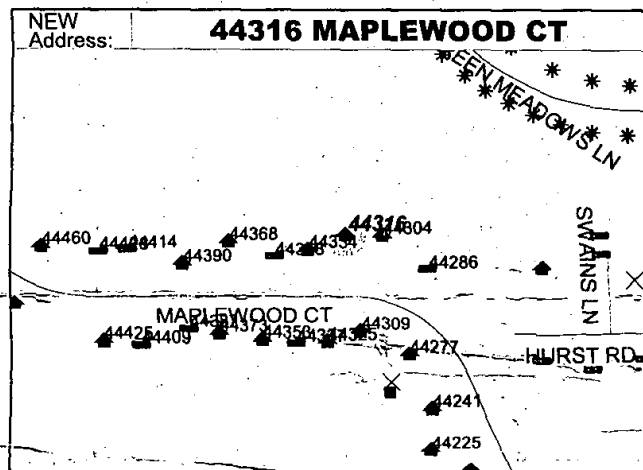
**VALERIE CURTIS
904-879-0911**

Data Collection & Mapping

**NASSAU COUNTY 911 MAPPING
904-879-0911
904-879-0912**

curtisv@nassaucountysheriff.com

**Check the map LOCATION.
If this is incorrect, call 904-879-0911.
Have the Site I.D. ready.**



Site I.D.: AA13482

The circled point on the map displays the location of the structure or site on MAPLEWOOD CT. If this is not the location for this address, please contact the mapping center as soon as possible. (Scale: 1 in.=750 ft)

Picture Not Available

**OLD Address: 4843 MAPLEWOOD CT
Collected with ZIP**

Addresses shown are the NEW addresses

Atlas Sheet 197

Field Comment: GRAY 1-STY, WHITE TRIM, DOORMER WINDOWS, GRAVEL DR