

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000090539

1. Entity Name

JAYMARK INDUSTRIES, INC.

Principal Place of Business

4725 N. COURTENAY PKWY
MERRITT ISLAND FL 32953
US

Mailing Address

4725 N. COURTENAY PKWY
MERRITT ISLAND FL 32953-7925
US

2. Principal Place of Business

805 MARINA RD.

Suite, Apt. #, etc.

3. Mailing Address

805 MARINA RD.

Suite, Apt. #, etc.

City & State

TITUSVILLE, FL

City & State

TITUSVILLE FL

Zip

32796

Country

US

Zip

32796

Country

US

4. FEI Number

59-3363351

Applied For

Not Applicable

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

WILLIAM J. STRAND

4725 N. COURTENAY PKWY
MERRITT ISLAND FL 32953

Name

JEFFREY W. GRAY

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

805-MARINA-RD.

City

TITUSVILLE

FL

Zip Code

32796

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

(NOTE: Registered Agent signature required when reinstating)

4-24-00

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	D	<input type="checkbox"/> Delete
NAME	EVANS, JOHN H	
STREET ADDRESS	1702 S. WASHINGTON AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	PVTS	<input checked="" type="checkbox"/> Delete
NAME	STRAND, WILLIAM J.	
STREET ADDRESS	4725 N. COURTENAY PKWY	
CITY-ST-ZIP	MERRITT ISLAND 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		<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	PVTS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEFFREY W. GRAY	
STREET ADDRESS	805 MARINA RD.	
CITY-ST-ZIP	TITUSVILLE, FL 32796	
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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-00

Date

321-269-8444 x203

Daytime Phone #

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90061 004 ***150.00