

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90107 016 ***550.00

DOCUMENT # P95000097432

1. Entity Name
JORDAN & SON AIR REPAIR, INC.

LA

Principal Place of Business

1516 E 11TH ST
PANAMA CITY FL 32401

Mailing Address

1516 E 11TH ST
PANAMA CITY FL 32401

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 **59-3355521**

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

JORDAN, KENNETH A JR
1516 E 11TH ST
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

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.

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 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P JORDAN, JR., KENNETH A**
STREET ADDRESS **8506 WALLCRAFT AVE**
CITY-ST-ZIP **YOUNGSTOWN FL 32466**

TITLE ☐ Delete
NAME **ST JORDAN, FRANCES**
STREET ADDRESS **806 WALLCRAFT AVE**
CITY-ST-ZIP **YOUNGSTOWN FL 32466**

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 ☐ 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 _____

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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: *Frances Jordan* **SIGNATURE REQUIRED FRANCES JORDAN**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-10-01
 Date

850 785-5447
 Daytime Phone #

CR2E034 (5/01)

ATTACHMENT



JORDAN & SON AIR REPAIR, INC.

1516 EAST 11TH STREET
PANAMA CITY, FLORIDA 32401

CAC056702

Telephone (850) 785-5447
Fax (850) 785-9968

September 10, 2001

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B0064885

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500


To Whom it May Concern:

This is to state, after calling your office and finding out that this is the second notice, that I never received the first form and I request a waiver of the \$400.00 late fee.

We have never filed late in the past and there is no way we would have let it get past us like this if we had gotten the first notice.

If you have any questions, please call me at (850) 785-5447.

Sincerely,


Frances Jordan
Sec/Treasurer