

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90291 027 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000015425

1. Entity Name
LENA-J FARMS, INC.



Principal Place of Business
222 NOBLE CIRCLE WEST
JACKSONVILLE, FL 32211

Mailing Address
222 NOBLE CIRCLE WEST
JACKSONVILLE, FL 32211

90066724



2. Principal Place of Business
1849 Mallory Street
Suite, Apt. #, etc.

3. Mailing Address
1849 Mallory Street
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Jacksonville, Florida

City & State
Jacksonville, Florida

4. FEI Number
59-3362934

Applied For
Not Applicable

Zip
32205

Country
USA

Zip
32205

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCOTT, WILLIAM J
1301 RIVERPLACE BLVD, SUITE 1609
JACKSONVILLE, FL 32207

7. Name and Address of New Registered Agent

Name
W. Hamilton Traylor

Street Address (P.O. Box Number is Not Acceptable)
2625 W. 5th Street

City Jacksonville FL Zip Code 32254

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

W. Hamilton Traylor

W. Hamilton Traylor

3/28/03

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

(NOTE: Registered Agent signature required when appointing)

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
D
SPENCE, JEFFREY C
222 NOBLE CIRCLE WEST
JACKSONVILLE, FL 32211 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SPENCE, JEFFREY C.
1849 Mallory Street
Jacksonville, Florida 32205 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SPENCE, DARLENE S
222 NOBLE CIRCLE WEST
JACKSONVILLE, FL 32211 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SPENCE, DARLENE S.
1849 Mallory Street
Jacksonville, Florida 32205 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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CITY-ST-ZIP
☐ 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:

JEFFREY C SPENCE

3.19.03

904 786 8038

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)