

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90298 005 ***158.75

0029015 AV

DOCUMENT # P96000053889

1. Entity Name
HOLMES CONTRACT SERVICES, INC.

Principal Place of Business

~~8232 RAMONA BLVD~~
JACKSONVILLE, FL. 32221

Mailing Address

8232 RAMONA BLVD
JACKSONVILLE, FL. 32221

2. Principal Place of Business

8323 Ramona Blvd

3. Mailing Address

8323 Ramona Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville FL

City & State

Jacksonville FL

Zip

32221

Country

Zip

32221

Country

4. FEI Number

59-3386278

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

FUSSELL, RONALD W.
8232 RAMONA BLVD
JACKSONVILLE FL 32221

7. Name and Address of New Registered Agent

Name

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

8323 Ramona Blvd.

City

Jacksonville

FL

Zip Code

32221

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

4/29/02

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, 2002 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 **DPS** ☐ Delete
 NAME **HOLMES, LOCKWOOD P**
 STREET ADDRESS ~~**8232 RAMONA BLVD**~~
 CITY-ST-ZIP **JACKSONVILLE FL 32221**

TITLE **DVPT** ☐ Delete
 NAME **FUSSELL, RONALD W.**
 STREET ADDRESS ~~**8232 RAMONA BLVD**~~
 CITY-ST-ZIP **JACKSONVILLE FL 32221**

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 **8323 Ramona Blvd**
 STREET ADDRESS **Jacksonville FL 32221**

TITLE ☒ Change ☐ Addition
 NAME **8323 Ramona Blvd**
 STREET ADDRESS **Jacksonville FL 32221**

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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 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 title empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/1/02

904-378 8098

CR2E034 (9/01)