

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90038 012 ***150.00

DOCUMENT # P96000065559

1. Entity Name

JURISCO, INC.



Principal Place of Business

**2852 REMINGTON GREEN CIRCLE
SUITE 202
TALLAHASSEE FL 32308**

Mailing Address

**2852 REMINGTON GREEN CIRCLE
SUITE 202
TALLAHASSEE FL 32308**

2. Principal Place of Business

1641 Metropolitan Circle

3. Mailing Address

1641 Metropolitan Circle

Suite, Apt. #, etc.

Suite A

Suite, Apt. #, etc.

Suite A

City & State

Tallahassee, Florida

City & State

Tallahassee, Florida

4. FEI Number

59-3395516

Applied For

Not Applicable

Zip
32308

Country
USA

Zip
32308

Country
USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HANLEY, WILLIAM R ESQ.
2852 REMINGTON GREEN CIRCLE
SUITE 202
TALLAHASSEE FL 32308**

7. Name and Address of New Registered Agent

Name

William R. Hanley, Esq.

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

1641 Metropolitan Circle, Suite A

City

Tallahassee

FL

Zip Code

32308

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

3/24/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 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

TITLE **D** ☐ Delete
NAME **HANLEY, WILLIAM R**
STREET ADDRESS **2852 REMINGTON GREEN CIRCLE #202**
CITY-ST-ZIP **TALLAHASSEE FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Address Change:** ☒ Change ☐ Addition
NAME
STREET ADDRESS **1641 Metropolitan Circle, Ste. A**
CITY-ST-ZIP **Tallahassee, FL 32308**

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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:

(WILLIAM R. HANLEY)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/04

Date

8504223655

Daytime Phone #