

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 24, 2001 8:00 am**  
**Secretary of State**

0140224 SP

**DOCUMENT # P96000081597**

1. Entity Name  
**PEARCE ENTERPRISES, INC.**

08-24-2001 90044 009 \*\*\*150.00

Principal Place of Business 900 S.R. 13 JACKSONVILLE FL 32259	Mailing Address 900 S.R. 13 JACKSONVILLE FL 32259
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3404628**

Applied For  
 Not Applicable

Zip Country

Zip Country

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

**PEARCE, JANICE L**  
**900 S.R. 13**  
**JACKSONVILLE FL 32259**

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 Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>PEARCE, JANICE L</b>
STREET ADDRESS	<b>900 S.R. 13</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL 32259</b>

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>PEARCE, CARL</b>
STREET ADDRESS	<b>900 S.R. 13</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL 32259</b>

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
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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: Janice L. Pearce **Janice L. Pearce** 8/20/01 904-287-1613  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

Attachment  
# 096 000081597

A0082542

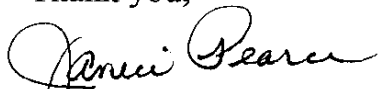
August 20, 2001

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

To Whom it May Concern:

I recently received the 2001 Uniform Business Report with a fee due of \$550.00. In past years this fee has been \$150.00. This is the first notice I have received for this fee this year, and I assume the extra \$400.00 is a late fee since it states it is due now. I was not aware it was time to file since I have received no prior notice. I am enclosing a check for \$150.00 which I hope will be acceptable as our corporation is not thriving.

Thank you,



Janice Pearce, president  
Pearce Enterprises, Inc.