

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000086298

1. Entity Name

JAMES DANIELS REALTY, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90020 032 ***150.00

Principal Place of Business

2121 CORPORATE SQ BLVD
 STE 174
 JACKSONVILLE FL 32216
 US

Mailing Address

2121 CORPORATE SQ BLVD
 STE 174
 JACKSONVILLE FL 32216
 US

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 **59-3416996**

Applied For

Not Applicable

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

DANIELS, JAMES E
 8703 BURKHALL ST
 JACKSONVILLE FL 32211

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 \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PST DANIELS, JAMES E
8703 BURKHALL ST
JACKSONVILLE FL

☐ Delete

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

TITLE
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D DANIELS, JAMES E
8703 BURKHALL ST
JACKSONVILLE FL 32211

☐ Delete

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☐ Change ☐ Addition

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:

James E. Daniels James E. Daniels

Date

Daytime Phone #

7/29/01

904-704-8688 cell
 904-720-5696 off

CR2E034 (10/00)