

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90124 049 ***150.00

DOCUMENT # P96000095562

1. Entity Name
JEAN IVIS, INC.

Principal Place of Business
**2300 BAJA TRAIL
ORMOND BEACH FL 32174**

Mailing Address
**2300 BAJA TRAIL
ORMOND BEACH FL 32174**



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 **59-3421413**

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

**IVIS, JEAN M
2800 BAJA TRAIL
ORMOND BEACH FL 32174**

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
IVIS, JEAN M
2300 BAJA TRAIL
ORMOND BEACH FL 32174** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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

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CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

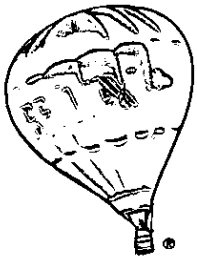
7/10/02

Date

386-299-3338

Daytime Phone #

CR2E034 (9/01)



RE/MAX
All Pro

Collectment 8
Doc# P96050095562
121502

Jean Ivis
REALTOR®

July 10, 02

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

re: \$150. vs. \$550.00

To Whom It May Concern:

When I received this renewal form, I forwarded it to my CPA's office to complete for me. I never really thought of it again until I received a late notice. I called the CPA's office. He apologized to me & said somehow the form was stuck in my file without him seeing it. Therefore I am asking to see if there is any way that the late fee can be waived. I have enclosed

Attachment 8 Orig A

\$150. - for the renewal. P96000095562

I did call your office concerning ^{12/1502}
this, but I was told to put it in writing
& mail my request in to you.

Thank you for considering this.

I look forward to hearing from you.

Sincerely -

Jean Ivis

President - Jean Ivis Inc.