

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000000665

1. Entity Name

THE JOHN KERWIN STUDIO, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90267 034 ***150.00

Principal Place of Business

Mailing Address

2800 LEPRECHAUN LANE
PALM HARBOR FL 34683

2800 LEPRECHAUN LANE
PALM HARBOR FL 34683-2316

00001011



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1711 MASSACHUSETTES AVE NW

1711 MASSACHUSETTES AVE NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

APT 108

APT 108

City & State

City & State

WASHINGTON DC

WASHINGTON DC

Zip

Country

Zip

Country

20036

USA

20036

USA

4. FEI Number

59-3423468

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

KERWIN, TIMOTHY J
2800 LEPRECHAUN LANE
PALM HARBOR FL 34683

Name

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

2014 OLD OAK LANE

City

SAFETY HARBOR,

FL

Zip Code

34695

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

Timothy J Kerwin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEB 08, 2000

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, 2000 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 ☒ Delete
NAME D
STREET ADDRESS KERWIN, TIMOTHY J
CITY-ST-ZIP 2800 LEPRECHAUN LANE
PALM HARBOR FL 34683

TITLE ☐ Change ☒ Addition
NAME PRESIDENT, SOLE DIRECTOR
STREET ADDRESS JOHN TODD KERWIN
CITY-ST-ZIP 1711 MASSACHUSETTES AVE. NW. (APT 108)
WASHINGTON, D.C. 20036-2136

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 like empowered.

SIGNATURE:

Timothy J Kerwin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FEB 08, 2000 727-799-5293

CR2E034 (9/99)