

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jun 07, 2001 08:00 AM****Secretary of State****DOCUMENT # P97000000665**1. Entity Name
THE JOHN KERWIN STUDIO, INC.**Principal Place of Business**1711 MASSACHUSETTES AVE NW
APT 108
WASHINGTON DC
20036 US**Mailing Address**1711 MASSACHUSETTES AVE NW
APT 108
WASHINGTON DC
20036 US**2. Principal Place of Business**

1711 MASSACHUSETTS AVE NW

3. Mailing AddressSuite, Apt. #, etc.
APT 108

Suite, Apt. #, etc.

City & State
WASHINGTON DC

City & State

Zip
20036Country
US

Zip

Country

4. FEI Number**59-3423468**

Applied For

Not Applicable

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentKERWIN TIMOTHY J
2014 OLD OAK LANESAFETY HARBOR
34695

FL

7. Name and Address of New Registered Agent

Name

KERWIN TIMOTHY J

Street Address (P.O. Box Number is Not Acceptable)
2109 MEADOWBROOK LANECity
CLEARWATER

FL

Zip Code
33759

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 _____ **06/07/2001**

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**TITLE PD ☐ Delete
NAME KERWIN JOHN T
STREET ADDRESS 1711 MASSACHUSETTES AVE NW 108
CITY-ST-ZIP WASHINGTON DC 200362136TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE PD ☒ Change ☐ Addition
NAME KERWIN JOHN T
STREET ADDRESS 1711 MASSACHUSETTS AVE NW 108
CITY-ST-ZIP WASHINGTON DC 200362136TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: John Todd Kerwin

PD

06/07/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)