

2000 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 10, 2000 8:00 am
Secretary of State

03-20-2000 90048 027 ***150.00

DOCUMENT # P97000005803

1. Entity Name

JACKSON MAGNETIC ENTERPRISES INC.

Principal Place of Business

Mailing Address

713 RIVIERA ISLE
 FT LAUDERDALE FL 33301

2900 N. Course Dr.
 Apt 307
 Pompano Beach
 FL 33069

6400 NW 5TH WAY
 FT LAUDERDALE FL 33309-6442

same

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

65-0733048

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

JACKSON-ZIER, KATHLEEN S
 2900 N. COURSE DR., BLDG 53, UNIT 307
 POMPANO BEACH FL 33069

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, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
President	JACKSON, KATHLEEN	2900 N. Course Dr.	1034 Ashford	☐
Secretary/Treasurer	Richard Zier	1034 Ashford Dr.	FT. Collins, CO 80526	☐
Vice-President	VR Simpson	117 Fairway Dr.	Clintonville, WI 54929	☐
				☐
				☐
				☐
				☐

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:

Kathleen S. Jackson-Zier, President

March 13, 2000 970

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Fee

3973493



Amica Mutual Insurance Company
Amica Life Insurance Company
Amica General Agency, Inc.

CORPORATE OFFICE
One Hundred Amica Way, Lincoln, RI 02865-1156
Mail: PO Box 6008, Providence, RI 02940-6008

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DIRECTORS

Joel N. Tobey
6 Harbour Rd.
Barrington, RI

Lowell C. Smith
1618 S.E. Edith Esplanade
Cape Coral, FL 33904

Ronald K. Machtley
1150 Douglas Pike
Smithfield, RI 02917

Robert R. Faulkner
228 Rumstick Rd.
Barrington, RI 02806

Henry S. Woodbridge, Jr.
100 Kings Highway
Pomfret, CT 06258

Peter B. Freeman
100 Alumni Ave.
Providence, RI 02906

Donald R. Goodby
22 Barrows Dr.
E. Greenwich, RI 02818

Patricia W. Chadwick
31 Hillcrest Park Rd.
Old Greenwich, CT 06870

Thomas A. Taylor
5 Brook Road
Swansea, MA 02777

Jeffrey P. Aiken
1071 E. Circle Drive
Whitefish Bay, WI 53217

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