2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State
04-30-2003 90095 041 ***150.00

0633627 AT

DOCUMENT # P97000008353

1. Entity Name
CJB SERVICES, INC.

Principal Place of Business	Mailing Address
3630 SOUTH HOPKINS AVENUE	P. O. BOX 5749
UNIT NO. 30	TITUSVILLE FL 32783-5749
TITUSVILLE FL 32780	
US	

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
3630 SOUTH HOPKINS AVENUE	
Suite, Apt. #, etc.: UNIT #24	Suite, Apt. #, etc.:
City & State: TITUSVILLE, FL ~~32780~~	City & State:
Zip: 32780 Country: USA	Zip: Country:

4. FEI Number NOT APPLICABLE ☐ 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
HARRIS, JOHN M.	Name: Richard E. Stadler, Esquire
1820 GARDEN STREET	Street Address (P.O. Box Number is Not Acceptable): 1820 Garden Street
TITUSVILLE FL 32796	City: Titusville FL Zip Code: 32796

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 4/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D NAME: KING, CHARLES R STREET ADDRESS: 3555C SABLE PALM LANE CITY-ST-ZIP: TITUSVILLE FL 32780	☐ Delete	TITLE: ✓ NAME: KING, CHARLES R. STREET ADDRESS: PO BOX 5749 CITY-ST-ZIP: TITUSVILLE, FL 32783	☒ Change ☐ Addition
TITLE: D NAME: RYAN, KATHERINE STREET ADDRESS: 3555C SABLE PALM LANE CITY-ST-ZIP: TITUSVILLE FL 32780	☐ Delete	TITLE: P NAME: RYAN, KATHERINE A. STREET ADDRESS: PO BOX 5749 CITY-ST-ZIP: TITUSVILLE, FL 32783	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED CHARLES R. KING 3/13/03 321.268.5576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)