

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90104 016 ***150.00

DOCUMENT # P97000008574

1. Entity Name
JLR PROPERTIES, INC.

Principal Place of Business

**291 SOUTHHALL LANE
 MAITLAND FL 32751**

Mailing Address

**291 SOUTHHALL LANE
 MAITLAND FL 32751**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-3422575**

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

**ROBINSON, RICHARD M
 201 EAST PINE STREET
 SUITE 1200
 ORLANDO FL 32801**

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	DV HOUSE, JEFFREY T MD 291 SOUTHHALL LANE MAITLAND FL 32751	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILSON, G EDWIN 291 SOUTHHALL LANE MAITLAND FL 32751	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TAO, DAVID 291 SOUTHHALL LANE MAITLAND FL 32751	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JAGER, D BRIAN 291 SOUTHHALL LANE MAITLAND FL 32751	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLO, JOSEPH A JR 291 SOUTHHALL LANE MAITLAND FL 32751	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUNICHKA, ERIC 291 SOUTHHALL LANE MAITLAND FL 32751	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARCARIO, THOMAS J. MD 291 SOUTHHALL LANE MAITLAND, FL 32751	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV KUNICHKA, ERIC MD 291 SOUTHHALL LANE MAITLAND, FL 32751	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KING, JEFFREY G. MD 291 SOUTHHALL LANE MAITLAND, FL 32751	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOUSE, JEFFREY T. MD 291 SOUTHHALL LANE MAITLAND, FL 32751	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, G. EDWIN MD 291 SOUTHHALL LANE MAITLAND, FL 32751	☒ 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: **ROBERT CUIJEPEN, CFO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/08/02

Date

(407) 667-0444

Daytime Phone #

CR2E034 (9/01)