

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 18, 2002 8:00 am
Secretary of State

08-18-2002 90127 037 ***150.00

DOCUMENT # P97000021753

1. Entity Name
J & P ENTERPRISES OF NORTHWEST FLORIDA, INC.

Principal Place of Business

40 W. NINE MILE ROAD
STE.2319
PENSACOLA FL 32514

Mailing Address

40 W. NINE MILE ROAD
PENSACOLA FL 32514

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
59-3435617

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

POPE, RICHARD A
40 W. NINE MILE ROAD
STE.2319
PENSACOLA FL 32514

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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Delete
NAME **POPE, RICHARD**
STREET ADDRESS **542 NORTHCREEK CIRCLE**
CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

850.506.0243

CR2E034 (9/01)

*I was deployed and not able to file by deadline. Please
waive the penalty.
Thank you. [Signature]*

DEPARTMENT OF THE AIR FORCE
HQ 919TH MISSION SUPPORT SQUADRON (AFRC)
EGLIN AFB FL 32542-6644

PRIVACY ACT OF 1974 APPLIES

SPECIAL ORDER
A-0280

DATE: 24 Sep 2001

1. **PERSONNEL DATA.** By direction of the President, 2LT POPE, RICHARD A 262-37-4086 is ordered to active duty according to one of the following authorities, based on instructions received from higher headquarters. Authority: Executive Order 13223 dated September 14, 2001 (HQ AFSOC/CAT, Msg # 232138Z).

SECURITY CLEARANCE INFORMATION: SECRET/ENTRANCE NATIONAL AGENCY CHECK/1-Mar-84. PAFSC: -31P1 DAFSC-31P1 UNIT PAS CODE: W60VVFV66, 919 SECURITY FORCES SQ.

PARTIAL MOBILIZATION, 10 USC 12302, (ADN: B30). Partial Mobilization tour length or From 24-SEP-2001 to 23-SEP-2002.

2. **REPORTING DATA.** Effective date of active duty is 24-SEP-2001. Individual is directed to proceed to 919 SFS Eglin AFB Fld 3 FL 32542-6644. Report to commander of organization assigned, not later than 24-SEP-2001. Failure to report within prescribed time limits will place the member in AWOL status. Thirty-one days after reporting AWOL status, the member will be placed in deserter status IAW AFI 36-2911, Desertion and Unauthorized Absence, 1 Jun 98.

3. **GENERAL INSTRUCTIONS.** Personnel on flying status are authorized to take part in flying activities during the period of active duty covered by this order. Pursuant to AFH 32-6009, Housing Handbook, 1 Jun 96, you will report to the base housing referral office servicing your new duty station before entering into any rental, lease, or purchase agreement for off-base housing. Authorizations to cite fiscal year 02 funds does not constitute authorization to obligate funds until approved by CONGRESS.

4. **FUND CITES.** Pay and Allowance FY01: 5713500 321 510 525725 / FY02: 5723500 522 510 525725
Tvl/Per Diem FY01: 5713500 321 5741.0M 5741.0J 525725 / FY02: 5723500 322 5741.0M 5741.0J 525725

5. **TRANSPORTATION AND ADVANCE PAY/ALLOWANCE:** Movement of dependents and household goods at USAF expense is not authorized. Except for Selected Reserve members activated in place. Travel by government-procured transportation will be directed when not within commuting distance. Refer to AFH 10-416, Chapter 6. Advance pay and travel are authorized IAW AFI 10-213, Comptroller Operations Under Emergency Conditions, 22 Jul 94. Special storage of HHGS in the vicinity of the PDS may be authorized IAW JFTR, Para U4770. Authorizing/approval authorities should exercise this authority judiciously after coordination with the wing commander.

6. **ADDITIONAL INFORMATION/INSTRUCTIONS.** This period of active service is exempt from the 5 year cumulative limit under USERRA IAW Title 38, U.S.C. Chap 43.

7. **REMARKS.** This order contains information protected under the Privacy Act of 1974. Any group order provided to the individual must be sanitized, that is, list only the last four of the SSAN and delete the home address for each other person on the order. This active duty order does not constitute authority to deploy from the mobilized location. If further deployment is required after reporting to Commander of assigned unit, a Contingency Exercise Deployment (CED) order must be published and furnished to the individual prior to departure.

FOR THE COMMANDER

Michael B. Black, LTC, USAFR
Commander, Military Personnel Flight



DISTRIBUTION:

- 12- each Individual
- 1 - ea Reserve MPF/DPMSA/PAY OFFICE
- 1 - ea G-MAJCOM/FM
- 2 - Number of copies to be prescribed locally