

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000028672

FILED
Apr 18, 2002 8:00 AM
Secretary of State

Entity Name: THE KIMMIK CORPORATION

Current Principal Place of Business:

1725 OAKHURST AVE
JACKSONVILLE, FL 32208

New Principal Place of Business:

5072 PICKETTville ROAD
JACKSONVILLE, FL 32203

Current Mailing Address:

PO BOX 40001
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 59-3437892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRAHAM, MARION JR
1725 OAKHURST AVE
JACKSONVILLE, FL 32208

Name and Address of New Registered Agent:

GRAHAM, MARION JR
5072 PICKETTville ROAD
JACKSONVILLE, FL 32203

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: MARION GRAHAM JR.

04/18/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAHAM, MARION JR.
Address: 1725 OAKHURST AVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: V () Delete
Name: GRAHAM, KIMBERLY S
Address: 1725 OAKHURST AVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: ST () Delete
Name: GRAHAM, CHERYL A
Address: 1725 OAKHURST AVE
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRAHAM, MARION JR.
Address: 5072 PICKETTville ROAD
City-St-Zip: JACKSONVILLE, FL 32203

Title: V (X) Change () Addition
Name: GRAHAM, KIMBERLY S
Address: 5072 PICKETTville ROAD
City-St-Zip: JACKSONVILLE, FL 32203

Title: ST (X) Change () Addition
Name: GRAHAM, CHERYL A
Address: 5072 PICKETTville ROAD
City-St-Zip: JACKSONVILLE, FL 32203

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIMBERLY GRAHAM

V

04/18/2002

Electronic Signature of Signing Officer or Director

Date