## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # P97000044094 Jan 18, 2000 8:00 am **Secretary of State** WILLIAM H. SWAN & SONS, INC. 01-18-2000 90187 011 \*\*\*150.00 Mailing Address Principal Place of Business 1326 HOLLYWOOD AVENUE 1326 HOLLYWOOD AVENUE JACKSONVILLE FL 32205-7852 JACKSONVILLE FL 32205 ÌUS 2. Principal Place of Business 3. Mailing Address 2598 Herschel Street P.O Box 3256 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number NOT APPLICABLE Jacksonville, FL Jacksonville, FL 32206 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32204 Fee Required 32206 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JACKSON, LARRY R Street Address (P.O. Box Number is Not Acceptable) 1326 HOLLYWOOD AVENUE 2598 Herschel Street JACKSONVILLE FL 32205 Zip Code Jacksonville 4 4 1 32204 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 Larry R. Jackson, President 01/11/2000 SIGNATUREZ. of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition **DPST** ☐ Delete TITLE TITLE JACKSON, LARRY R NAME NAME STREET ADDRESS STREET ADDRESS 1326 HOLLYWOOD AVENUE 2598 Herschel Street CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32205 Jacksonville, FL 32204 Change Addition TITLE TITLE ☐ Delete PENCE, JOSEPH E NAME NAME STREET ADDRESS STREET ADDRESS 1326 HOLLYWOOD AVENUE 2598 Herschel Street CITY - ST-7IP CITY-ST-ZIP Jacksonville FL 32205 Jacksonville, FL 32204 ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE: 2

CITY-ST-ZIP

Larry R Jackson 01/11/2000

(904) 358-7605