

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90113 034 ***150.00

DOCUMENT # P97000049132

1. Entity Name

K.J NEILL ENTERPRISES, INC.



Principal Place of Business

~~30 HATCHETT CREEK RD~~
~~VENICE FL 34292~~

Mailing Address

~~30 HATCHETT CREEK RD~~
~~VENICE FL 34292~~

2. Principal Place of Business

1424 GRASSY SPRAIN ST
Suite, Apt. #, etc.

3. Mailing Address

1424 GRASSY SPRAIN ST
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

59-3449332

Applied For

Not Applicable

Zip

Country

34234 SARASOT

Zip

Country

34234 SARASOTA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEILL, KARL J

~~30 HATCHETT CREEK RD~~
~~VENICE FL 34292~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1424 GRASSY SPRAIN ST.

City

SARASOTA

FL

Zip Code

34234

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, 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

TITLE D ☐ Delete
NAME NEILL, KARL J
STREET ADDRESS 30 HATCHETT CREEK RD
CITY-ST-ZIP VENICE FL 34292

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1424 GRASSY SPRAIN ST
CITY-ST-ZIP SARASOTA FL 34234

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

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

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: *Karl Neill* PRESIDENT
REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KARL NEILL 4/8/03 941 726-3588

CR2E034 (10/02)