

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000070740

1. Entity Name

PRIORITY MANAGEMENT-JACKSONVILLE, INC.

Principal Place of Business

12901 HUNT CLUB RD. N.
JACKSONVILLE FL 32224

Mailing Address

12901 HUNT CLUB RD. N.
JACKSONVILLE FL 32224

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

SHIRLEY, ERIN C.G.
12901 HUNT CLUB RD. N.
JACKSONVILLE FL 32224

7. Name and Address of New Registered Agent

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, 2001 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

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---------------------------------|---|---|------|
| TITLE | NAME | TITLE | NAME |
| <input type="checkbox"/> Delete | SHIRLEY, F. ALLEN 12901 HUNT CLUB RD. N. JACKSONVILLE FL 32224 | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| <input type="checkbox"/> Delete | SHIRLEY, ERIN C.G. 12901 HUNT CLUB RD. N. JACKSONVILLE FL 32224 | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

F. ALLEN SHIRLEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-01

Date

904-992-9911

Daytime Phone #

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90031 009 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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