## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Jan 25, 2000 8:00 am Secretary of State DOCUMENT # P97000072974 GARY JERNIGAN BUILDERS, INC. 01-25-2000 90123 026 \*\*\*150.00 Principal Place of Business Mailing Address 6123 CURTIS ROAD 6123 CURTIS ROAD PACE FL 32571-9795 PACE FL 32571 B0007375 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3471402 Not appeal Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JERNIGAN, GARY Street Address (P.O. Box Number is Not Acceptable) 6123 CURTIS ROAD PACE FL 32571 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ..... ☐ Change ☐ Delete TITLE TITLE JERNIGAN, GARY, NAME STREET ADDRESS STREET ADDRESS 6123 CURTIS ROAD CITY-ST-ZIP CITY-ST-ZIP PACE FL 32571 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Defete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS GARY JERNIGAN BUILDER INC CITY-ST-ZIP 13. I hereby certify that the incompanion 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 explorantal report is true and accurate and triat 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 recovery of the corporation of of th changed, or on an attachme (Comp) of the specific all other like