2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000072974

1. Entity Name

SIGNATURE:

GARY JERNIGAN BUILDERS, INC.



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90224 013 ***150.00

Principal Place 6123 CURTIS I PACE FL 3257	ROAD	Mailing Address 6123 CURTIS ROAD PACE FL 32571			
2. Principal Place of Business		3. Mailing Address		- I HOBELLOSO HEO NOMIL COMIL COMIL DELLA BOLLA COMIL HOPED HEN	# 10111 (8011 #141 1941
Suite, Apt. #, etc.		Suite, Apt: #, etc.		CHÈCK HERE IF MAKING CHANGES	
City & State)	City & State		4. FEI Number 59-3471402	Applied For Not Applicable
Žip	Country	Zip	Country	5. Certificate of Status Desired	5 Additional equired
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	
	¥		Name	,	
JERNIGAN, GARY 6123 CURTIS ROAD			Street Address	P.O. Box Number is Not Acceptable)	
PACE FL	•				
			City	FL Zip	o 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. 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					
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	of State	_	Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JERNIGAN, GARY 6123 CURTIS ROAD PACE FL 32571	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	c ₁	nange Addition
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12. I hereby of indicated of the corchanged,	pertify that the information supplied will on this report or supplemental report poration or the receiver or trustee emp or on an attachment with an address.	h this filing does not qualify to is true and accurate and that cowered to execute this repo- with all other like empowere	for the exemption stated in Stated in Stated in State of the signature shall have the state of t	Section 119.07(3)(i), Florida Statutes. I further certify the e same legal effect as if made under oath; that I am an 07, Florida Statutes; and that my name appears in 1900	at the information officer or director 10 or Block 11 if