

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

01-10-2003 90211 017 ***150.00

DOCUMENT # P97000079589

1. Entity Name
J PARKS INTERIOR FURNISHINGS, INC.



Principal Place of Business
**101 S FRANKLIN ST
#100
TAMPA FL 33602
US**

Mailing Address
**PO BOX 271510
TAMPA FL 33688-1510
US**



2. Principal Place of Business
4159 Northmeadow Cr.

3. Mailing Address
P.O. Box 271510

☒ CHECK HERE IF MAKING CHANGES

City & State
Tampa FL

4. FEI Number
59-3467977

Applied For
Not Applicable

Zip
33624

Country
USA

Zip
33688-1510

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PARKS, JAMES M
101 S, FRANKLIN ST. #100
TAMPA FL 33602**

Name
Parks, James M.

Street Address (P.O. Box Number is Not Acceptable)
4159 Northmeadow Cr.

City
Tampa FL 33624

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 *James M. Parks* **1-8-03**
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
D

NAME
PARKS, JAMES M

STREET ADDRESS
101 S. FRANKLIN ST. #100

CITY-ST-ZIP
TAMPA FL 33602

☒ Delete

TITLE
President

NAME
Parks, James M.

STREET ADDRESS
4159 Northmeadow Cr.

CITY-ST-ZIP
Tampa FL 33624

☒ Change ☐ Addition

TITLE
V

NAME
PARKS, BEVERLY P

STREET ADDRESS
101 S FRANKLIN ST 100

CITY-ST-ZIP
TAMPA FL 33602

☒ Delete

TITLE
Vice President

NAME
Parks, Beverly P.

STREET ADDRESS
4159 Northmeadow Cr.

CITY-ST-ZIP
Tampa FL 33624

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

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: *James M. Parks* **1-8-03 818-265-2800**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)