

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**  
 05-22-2002 90185 020 \*\*\*150.00

0600215 AT

**DOCUMENT # P97000102585**

**1. Entity Name**  
**JIM AND COMPANY INC.**

**Principal Place of Business**  
**3808 13TH AVENUE WEST**  
**BRADENTON FL 34205**

**Mailing Address**  
**P.O. BOX 14201**  
**BRADENTON FL 34280**  
**US**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number** **65-0803907**

Applied For  
 Not Applicable

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

DO NOT WRITE IN THIS SPACE



**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**ALLEN, JAMES M**  
**3808 13TH AVENUE WEST**  
**BRADENTON FL 34205**

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** \_\_\_\_\_ (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, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **PD** ☐ Delete  
**NAME** **ALLEN, JAMES M**  
**STREET ADDRESS** **3808 13TH AVENUE WEST**  
**CITY-ST-ZIP** **BRADENTON FL 34205**

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

**TITLE** **STD** ☐ Delete  
**NAME** **ALLEN, ELISE N**  
**STREET ADDRESS** **3808 13TH AVENUE WEST**  
**CITY-ST-ZIP** **BRADENTON FL 34205**

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

**TITLE** **VD** ☒ Delete  
**NAME** **TOMLINSON, JAMES C**  
**STREET ADDRESS** **3408 48TH STREET WEST**  
**CITY-ST-ZIP** **BRADENTON FL 34209**

☐ Change ☒ Addition  
**TITLE** **VD**  
**NAME** **JANET ORLANDO**  
**STREET ADDRESS** **6218 48TH AVE DR E**  
**CITY-ST-ZIP** **Bradenton FL 34203**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**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:** ELISE N ALLEN 4/27/02 941-746-6196  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)