

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 01, 2001 08:00 AM**
Secretary of State**DOCUMENT # P97000102663**1. Entity Name
SOUTH BAY JACKSON FAMILY, INCORPORATED

Principal Place of Business

265 SW 11TH AVE.

S. BAY
33493

FL

US

Mailing Address

265 SW 11TH AVE.

S. BAY
33493

FL

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

65-0801128

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

JONES DANNY D
7 LAKESIDE CIR
2997 BACOM POINT RD
PAHOKEE
33476

FL

US

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 **DANNY D. JONES****05/01/2001**

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

TITLE T ☐ Delete
NAME JONES DIANE M
STREET ADDRESS 7 LAKESIDE CIR
CITY-ST-ZIP PAHOKEE FL 33476TITLE T ☒ Change ☐ Addition
NAME JACKSON VERNICE
STREET ADDRESS 265 SW 11TH AVE
CITY-ST-ZIP SOUTH BAY FL 33493TITLE S ☐ Delete
NAME JACKSON NARISSA
STREET ADDRESS 1101 CHORUS WAY
CITY-ST-ZIP ROYAL PALM BCH FL 33411TITLE S ☒ Change ☐ Addition
NAME JONES DIANE
STREET ADDRESS 7 LAKESIDE CIRCLE
CITY-ST-ZIP PAHOKEE FL 33476TITLE VP ☐ Delete
NAME JONES DANNY D
STREET ADDRESS 7 LAKESIDE CIR
CITY-ST-ZIP PAHOKEE FL 33476TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE P ☐ Delete
NAME JACKSON KENNETH S
STREET ADDRESS 265 S W 11TH AVE
CITY-ST-ZIP S BAY FL 33493TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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: **Danny D. Jones**

VP

05/01/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)