

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90052 030 ***150.00

DOCUMENT # P98000001084

1. Entity Name

JCJ ENTERPRISES OF SEBASTIAN, INC.

Principal Place of Business

**9492 90TH AVENUE
VERO BEACH FL 32967**

Mailing Address

**523 CROSS CREEK CIR
SEBASTIAN FL 32958
US**

2. Principal Place of Business

3. Mailing Address

6086 Addington Overlook

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Acworth Ga.

4. FEI Number

65-0803809

Applied For

Not Applicable

Zip

Country

Zip

Country

30101

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

**BRYANT, DENNIS A
523 CROSS CREEK CIRCLE
SEBASTIAN FL 32958**

Name

Dennis A. Bryant

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

6086 Addington Overlook

9492 90th Ave

City

Acworth

FL

Zip Code

32967

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/14/01

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 **DPT** ☐ Delete
NAME **BRYANT, DENNIS**
STREET ADDRESS **523 CROSS CREEK CIRCLE**
CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE ☒ Change ☐ Addition
NAME **6086 Addington Overlook**
STREET ADDRESS **Acworth, Ga**
CITY-ST-ZIP **30101**

TITLE **VPS** ☐ Delete
NAME **BRYANT, VICKI M**
STREET ADDRESS **523 CROSS CREEK CIRCLE**
CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE ☒ Change ☐ Addition
NAME **6086 Addington Overlook**
STREET ADDRESS **Acworth, Ga**
CITY-ST-ZIP **30101**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/10/01 770-508-5923

CR2E034 (10/00)