

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90093 039 ***158.75

DOCUMENT # P98000008634

1. Entity Name
JIMSETTERS UNLIMITED INC.

Principal Place of Business

1507 W MAIN ST
LEESBURG FL 34748

Mailing Address

1507 W MAIN ST
LEESBURG FL 34748

2. Principal Place of Business

2105 Butler Street

Suite, Apt. #, etc.

3. Mailing Address

2105 Butler Street

Suite, Apt. #, etc.

City & State

Leesburg, FL 34748

Zip

Country

City & State

Leesburg, FL 34748

Zip

Country

4. FEI Number

59-3335694

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRIFFITH, JIMMY
1218 BONAIRE DRIVE
LEESBURG FL 34748

7. Name and Address of New Registered Agent

Name

Jimmy Griffith

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

2105 Butler Street

City

Leesburg

FL

Zip Code
34748

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

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
 Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **VP** ☐ Delete
NAME **GRIFFITH, JIMMY**
STREET ADDRESS **1507 W MAIN ST**
CITY-ST-ZIP **LEESBURG FL 34748**

TITLE **O** ☐ Delete
NAME **GRIFFIN, DOUGLAS M**
STREET ADDRESS **36848 TRUDY RD.**
CITY-ST-ZIP **FRUITLAND PARK FL 34731**

TITLE **D** ☐ Delete
NAME **ROSE, DENNIS**
STREET ADDRESS **1507 W MAIN ST**
CITY-ST-ZIP **LEESBURG FL 34748**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Pres/Director** ☒ Change ☐ Addition
NAME **Jimmy Griffith**
STREET ADDRESS **2105 Butler Street**
CITY-ST-ZIP **Leesburg, FL 34748**

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

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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 #

CR2E034 (9/01)