

FILED
Jan 08, 2002 8:00 am
Secretary of State

01-08-2002 90029 046 ***150.00

[illegible]

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000037036		Jan 08, 2002 8:00 am Secretary of State 01-08-2002 90029 046 ***150.00	
1. Entity Name J. PARKER AILSTOCK, P.A.			
Principal Place of Business 2615 NW 5 PL GAINESVILLE FL 32605		Mailing Address 2615 NW 5 PL GAINESVILLE FL 32605	
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 59-3515810		Applied For Not Applicable	
5. Certificate of Status Desired		5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PARKER AILSTO, JANET 2615 NW 5 PL GAINESVILLE FL 32605		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		10. Election Campaign Financing Trust Fund Contribution.	
FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D PARKER AILS, JANET 2615 NW 5 PL GAINESVILLE FL 32605		TITLE 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]		[Signature] 7, 2002 352 378-0304	