

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90065 003 ***150.00

DOCUMENT # P98000038658

1. Entity Name
SOUTHERN PLANTATION, INC.

Principal Place of Business
1515 CR 210 W
SUITE 203
JACKSONVILLE FL 32259

Mailing Address
1515 CR 210 W
SUITE 203
JACKSONVILLE FL 32259

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

4. FEI Number **59-3520338**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

GORDON, ALAN M ESQ
9485 REGENCY SQUARE BLVD #220
JACKSONVILLE FL 32225

7. Name and Address of New Registered Agent

Name **Wallace Reid Walls**
 Street Address (P.O. Box Number is Not Acceptable)
1515 CR 210 W.
 City **Jacksonville** **FL** Zip Code **32259**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Wallace Reid Walls** **9/11/02**
 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	CPTD WALLS, WALLACE REID 3516 INDIAN CREEK BLVD. JACKSONVILLE FL 32259	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD WALLS, BRENDA ANN 3516 INDIAN CREEK BLVD. JACKSONVILLE FL 32259	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Wallace Reid Walls Pres.** **9/11/02** **904-384-4822**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

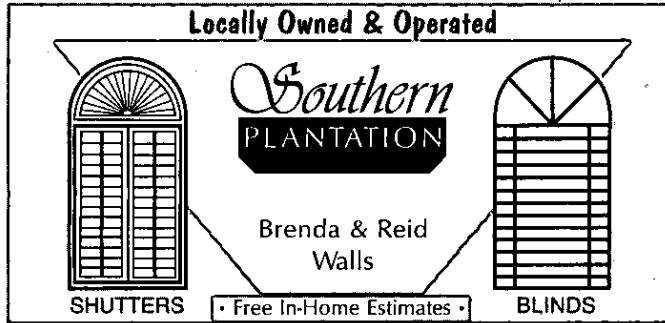
CR2E034 (4/02)

Attachment
SOUTHERN PLANTATION, INC. #P98000038658

JACKSONVILLE
(904) 384-4822

FERNANDINA
(904) 261-7161

LIBERTY FURNITURE
(904) 737-5080



SAVANNAH
(912) 447-4999

125247
ST. SIMONS
(912) 638-5580

ST. AUGUSTINE
(904) 824-2464

www.southernplantation.org

OFFICE 1515 CR 210 WEST • JACKSONVILLE, FL 32259 • (904) 384-4822 • FAX (904) 824-2997 • TOLL FREE 1-888-352-1176

Per instructions included with the renewal
notice received, due by Sept 13th,

I respectfully inform you that this
notice is our first notice and no previous
notice was received by me.

Therefore I have completed the notice
and include the original fee of \$150⁰⁰
as instructed

Document # P-98000038658

Thank you

Wallace Reid Wall, Jr.