

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90336 007 ***150.00

DOCUMENT # **P980000040637**

1. Entity Name

F & J Trucking, Inc.

DO NOT WRITE IN THIS SPACE

80131494

2. Principal Place of Business

18650 Broken Arrow Rd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hilliard, FL

City & State

4. FEI Number

59-3510149

Applied For

Not Applicable

Zip

32046

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Francis M. Layden

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

18650 Broken Arrow Rd.

City Hilliard

FL

Zip Code

32046

**DO NOT WRITE
IN THIS SPACE**

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 *Francis Layden*

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)

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	President Francis M. Layden 18650 Broken Arrow Rd Hilliard, FL 32046	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T Judy I. Layden	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE *Francis Layden*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-20-02

Date

Daytime Phone #

CR2E034B (12/01)

Attachment
#B0131494

Department of state

Dear sir:

ON 4-5-02 I mailed a check
for \$150⁰⁰. I looked over my books
I see no returned check for this
amount. I am sending another check
will do my best not to let this
happen again.

Thank you

Fand J Trucking Co.
Francis Lyden