## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 18, 2002 8:00 am Secretary of State P98000044404 DOCUMENT # 1. Entity Name 07-18-2002 90126 013 \*\*\*150.00 NEPTUNE FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 812 BARBARA LANE 812 BARBARA LANE JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3510102 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REISENAUER, JOSEPH R Street Address (P.O. Box Number is Not Acceptable) 812 BARBARA LANE JACKSONVILLE BEACH FL 32250 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (4/02)**PSTD** TITLE ☐ Change ☐ Addition ☐ Delete TITLE REISENAUER, REMONIA S NAME NAME 812 BARBARA LANE STREET ADDRESS STREET ADDRESS JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition REISENAUER, JOSEPH R NAME NAME 812 BARBARA LANE STREET ADDRESS STREET ADDRESS JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE MYRICK, AMBER L = NAME NAME 812 BARBARA LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change NAME NAME

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 in changed, or on an attachment with an address, with all other like empowered. 904-24

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

FILED

## NEPTUNE FINANCIAL SERVICES, INC. P.O. BOX 51453

## JACKSONVILLE BEACH, FL 32240

Phone: (904)241-4455 / Fax: (904)249-3913

July 17, 2002

#P9 800004446Y 1 Z1 9 88

Division of Corporations
Uniform Business Report Filings
P O Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

This is the first notice we received that this fee was due. We contacted your office and were advised to send in the \$150.00 fee.

The gentleman advised to enclose this letter along with the fee.

Thank You:

Remonia S R Reisenauer