## **FILED** 2000 UNIFORM BUSINESS REPORT (UBR) May 31, 2000 8:00 am Secretary of State DOCUMENT # P98000079571 05-31-2000 90006 046 \*\*\*550.00 J.A.M.S., INC. Principal Place of Business Mailing Address 2311 ROGERS ROAD 2993 S. PEORIA STREET LAKELAND FL 33813 AURORA CO 80014-5705 2. Principal Place of Business 3. Mailing Address 12311 E. Cornell Ave. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 23 Applied For 4. FEI Number City & State City & State 59-3534573 Aurora, CO Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired 80014-3323 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent The state of Name REHER, DEBORA C Street Address (P.O. Box Number is Not Acceptable) 2311 ROGERS ROAD LAKELAND FL 33813 Zip Code FL 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. :DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition □ Delete TITLE TITLE NAME SHERWOOD, JOHNNY H NAME STREET ADDRESS STREET ADDRESS POST OFFICE BOX 1890 N/A CITY-ST-ZIP CITY-ST-ZIP **FARMINGTON NM 87499** Change ☐ Addition STD ☐ Delete TITLE NAME FELLOWS, DOUGLAS E NAME 3; Fellows, Douglas E. STREET ADDRESS POST OFFICE BOX 1598 STREET ADDRESS 2103 E. County Rd. 14 CITY-ST-ZIP CITY-ST-ZIP : -LOVELAND CO 80539 Loveland, CO 80537 ☐ Delete TITLE Change Addition TITLE NAME Reher, Debora C. NAME 12311 E. Cornell Ave. #23 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Aurora, CO 80014-3323 ☐ Change ☐ Addition Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 of 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.

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Debora C. Reher Secretary

05-20-00

303-750-4930

☐ Change

☐ Addition

Date Daytime Phone #