

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90462 042 ***150.00

DOCUMENT # P98000087466

1. Entity Name

JAMES M. DAYLOR, INC.



Principal Place of Business

**316 PLANTATION CIRCLE
PONTE VEDRA FL 32082**

Mailing Address

**316 PLANTATION CIRCLE
PONTE VEDRA FL 32082**

2. Principal Place of Business

1361 13th Ave South

3. Mailing Address

1361 13th Ave South

Suite, Apt. #, etc.

240

Suite, Apt. #, etc.

240

City & State

Jacksonville Beach FL

City & State

Jacksonville Beach, FL

Zip

32250

Country

Duval

Zip

32250

Country

Duval



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3539943

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DAYLOR, JAMES M
316 PLANTATION CIRCLE
PONTE VEDRA FL 32082**

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. 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

James M. Daylor

03/01/03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☐ Delete
NAME	DAYLOR, JAMES M	
STREET ADDRESS	316 PLANTATION CIRCLE	
CITY-ST-ZIP	PONTE VEDRA FL 32082	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

James M. Daylor

03/01/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

904.241-4240

CR2E034 (10/02)

90038809

Attachment

098000087466

Please note change of address, phone number and fax number:

1361 13th Ave S., Ste. 240
Jacksonville Beach, FL 32250
Phone: 904-241-4240
Fax: 904-241-1850
