

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087574

1. Entity Name
JVK, INC.

FILED
Jul 11, 2000 8:00 am
Secretary of State

07-11-2000 90172 047 ***150.00

Principal Place of Business
14801 LAGUNA DRIVE
FORT MYERS FL 33908

Mailing Address
14801 LAGUNA DRIVE
FORT MYERS FL 33908

R



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0874798**

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COSTELLO, TRUMAN J
12670 NEW BRITTANY BLVD. #101
FORT MYERS FL 33908

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

~~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, 2000 Min. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANDENORTH, JAMES F 14801 LAGUNA DRIVE FORT MYERS FL 33908	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VADENORTH, KAREN L 14801 LAGUNA DRIVE FORT MYERS FL 33908	<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

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 JAMES F. VANDENORTH RECEIVED James Vandnorth 7-05-00 (941) 781-3720
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

Peppertree Pointe Marina

Attachment
D# pgs 000087574
DW 69054

July 5, 2000

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, Florida 32302-1500

Re: JVK INC.

To Whom This May Concern:

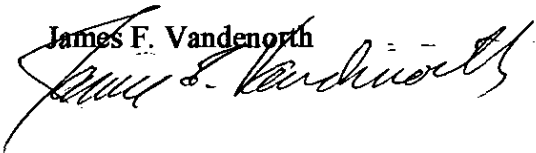
Enclosed is our check for \$150.00 for our annual Uniform Business Report filing fee.

We apologize for not sending this payment in before May 1, but we can honestly say that we have no record of receiving a first request.

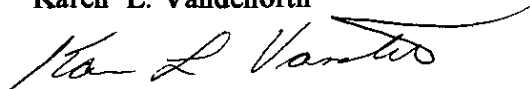
Sincerely yours,

JVK, Inc.

James F. Vandenorth



Karen L. Vandenorth



JV:ml

Enclosure - Check