

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90742 011 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000104320

1. Entity Name
1 LITTLE JOHN CORP.



Principal Place of Business
8750-11 GLADIOLUS DRIVE
SUITE 306
FORT MYERS, FL 33908

Mailing Address
8750-11 GLADIOLUS DRIVE
SUITE 306
FORT MYERS, FL 33908

90123139



2. Principal Place of Business

15880-300 Summerlin Rd

3. Mailing Address

15880-300 Summerlin Rd

Suite, Apt. #, etc.

306

Suite, Apt. #, etc.

306

City & State

Fort Myers, FL

City & State

Fort Myers, FL

Zip

33908

Country

Zip

33908

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUZALKA, JOSEF
8750-11 GLADIOLUS DRIVE
SUITE 306
FORT MYERS, FL 33908

7. Name and Address of New Registered Agent

Name

Novak Vaclav

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

15880-300 Summerlin Rd

Suite 306

City

Fort Myers

FL

Zip Code

33908

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]

(NOTE: Registered Agent Signature required when resigning)

DATE

4/24/03

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

TITLE **D** ☐ Delete
NAME **BUZALKA, JOSEF**
STREET ADDRESS **8750-11 GLADIOLUS DRIVE SUITE 306**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Pres** ☒ Change ☐ Addition
NAME **NOVAK, VACLAV**
STREET ADDRESS **15880-300 Summerlin Rd #306**
CITY-ST-ZIP **Fort Myers, FL 33908**

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

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

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

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

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/03

DATE

Daytime Phone #

CR2E034 (10/02)