

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State
04-11-2003 90171 015 ***150.00

DOCUMENT # P99000008356

1. Entity Name
D.K.J. PETERSON, INC.



Principal Place of Business
2340 PLEASANT HILL RD.
KISSIMMEE FL 34746
US

Mailing Address
2340 PLEASANT HILL RD.
KISSIMMEE FL 34746
US

2. Principal Place of Business

2340 PLEASANT HILL RD

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE, FL

City & State

SAME

Zip

34746

Country

OSCEOLA

Zip

SAME

Country

US

4. FEI Number

65-0896894

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

PETERSON, D.E.
2340 PLEASANT HILL RD.
KISSIMMEE FL 34746

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 \$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 **P** ☐ Delete
NAME **PETERSON, ELEANOR**
STREET ADDRESS **2340 PLEASANT HILL RD**
CITY-ST-ZIP **KISSIMMEE FL 34746**

TITLE **V** ☐ Delete
NAME **PETERSON, DONALD E**
STREET ADDRESS **2340 PLEASANT HILL RD**
CITY-ST-ZIP **KISSIMMEE FL 34746**

TITLE **S** ☐ Delete
NAME **HUGHES, JOHN**
STREET ADDRESS **336 MONTANA AVE**
CITY-ST-ZIP **SAINT CLOUD FL 34769**

TITLE **T** ☐ Delete
NAME **PETERSON, KENNETH**
STREET ADDRESS **1735 WEST VIRGINIA DR**
CITY-ST-ZIP **KISSIMMEE FL 34744**

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: **Eleanor Peterson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/03

Date

467-847-3896

Daytime Phone #

CR2E034 (10/02)