2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Aug 25, 2003 8:00 am Secretary of State

07-30-2003 90072 017 ***150.00

P99000011498 **DOCUMENT#** 1. Entity Name JOHN ARD DISTRIBUTING, INC. Principal Place of Business Mailing Address 55054894 2815 GODWIN LANE 2815 GODWIN LANE PENSACOLA FL 32526 PENSACOLA FL 32526 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 59-3554576 Not Applicable Country Zio Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required - 6.- Name and Address of Current Registered Agant 7. Name and Address of New Registered Agent ARD. FRANK J Street Address (P.O. Box Number is Not Acceptable) 2815 GODWIN LANE PENSACOLA FL 32526 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, broad or printer) name of registered egent and title if amplicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee Will be \$750.00 Trust Fund Contribution Added to Fees Make: Check: Rayable to: Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition CR2E034 (4/03 ARD, FRANK J NAME NAME 2815 GODWIN LANE STREET ADDRESS STREET ADDRESS PENSACOLA FL 32528 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE - ._ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 there and occurred to the composition or the receiver or trace empowered to execute his report as required by Chapter 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a address with all piner like empowered.

河尼DFRANK J. ARD

attachment

Frank J. Ard 2815 Godwin Lane Pensacola, FL 32526

August 19, 2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern,

This is my second attempt to get the late fee waived. Your office said that if I did not ever receive the form to be filed by May 2003, to write a letter stating such and the fee would be waived.

I did not receive the prior UBR for 2003 from your office which would have been due in May 2003. Please waive the late fee of \$400.00 and accept this payment of \$150.00 as payment in full for my 2003 UBR.

Sincerely,

Frank J. Ard

attachment

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Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

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