

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 08, 2000 08:00 AM
Secretary of State

DOCUMENT # P99000050524

1. Entity Name
JKMK CORPORATION

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| Principal Place of Business 627 8TH STREET CLERMONT FL 34711 | Mailing Address 606 PARK VALLEY CIR. CLERMONT FL 34711 |
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| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. City & State | 3. Mailing Address Suite, Apt. #, etc. City & State |
|---|---|

DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 4. FEI Number 59-3584271 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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|---|--|---|--|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| STRICKLAND JAMES 627 8TH STREET CLERMONT FL 34711 | | 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 **09/08/2000**
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

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| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/> | FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| D MOREAU MICHAEL 10001 FLORIDA BOYS RANCH RD. CLERMONT FL 34711 | <input checked="" type="checkbox"/> Delete | D CALHOUN JAMES P.JR. 611 PARK VALLEY CIRCLE CLERMONT FL 34711 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| D STRICKLAND JAMES 606 PARK VALLEY CIR CLERMONT FL 34711 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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 B. Strickland DATE: 09/08/2000