

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000053711

1. Entity Name  
JAKCO, INC.

**FILED**  
**Sep 06, 2001 8:00 am**  
**Secretary of State**

09-06-2001 90054 007 \*\*\*158.75

Principal Place of Business Mailing Address  
~~146 HIDDEN COVE LANE~~ 23-Poinciana Way ~~146 HIDDEN COVE LANE~~  
PONTE VEDRA FL 32082 PONTE VEDRA FL 32082



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

23 Poinciana Way

Suite, Apt. #, etc.

23 Poinciana Way

City & State

Ponte Vedra Bch. Fla.

City & State

Ponte Vedra Bch. Fla.

Zip

32082

Country

St. Johns

Zip

32082

Country

St. Johns

4. FEI Number

59-3581837

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPiegel & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

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

Jakco Inc.

Jack S. Billingsley Pres.

8/27/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. 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 12, 2001 Fee 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

TITLE NAME  
PSTD BILLINGSLEY, JACK  
STREET ADDRESS  
~~146 HIDDEN COVE LANE~~ 23 Poinciana Way  
CITY-ST-ZIP  
PONTE VEDRA FL 32082

☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS  
CITY-ST-ZIP

No Change

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS  
CITY-ST-ZIP

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:

JACK S. BILLINGSLEY Pres.

8/27/01 904-273-3928

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment

AO 83694

Doc. # 9900005-3711

8/27/01

To: Pa. Dept of State Division of Corp.  
From: Jakes Inc. Jack Billingsley

Subject: 2001 Uniform Business Report.  
FE Number 59-3581837

Jakes's address changed in April of This year. I never received your Billing or Notification of Filing fee. I only received this notice yesterday, Aug. 26<sup>th</sup>. I called Matt in your office. His advice was to mail the Filing fee of \$150, (enclosed), and write a letter of failure to receive. Please make of record the correct address.

Thank.

Jakes Inc.  
Jack Billingsley  
President

Dear God,

IF THIS LOAD  
IS TOO  
MUCH  
... WILL  
YOU  
LIFT  
IT?

