

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 10, 2001 8:00 am
Secretary of State

05-10-2001 90105 029 ***150.00

DOCUMENT # P99000061198

1. Entity Name

REFLECTIONS JEWELRY, INC.

Principal Place of Business

416 MAIN STREET
LAKE VILLAGE AR 71653

Mailing Address

P.O. BOX 767
LAKE VILLAGE AR 71653

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3585700

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VANDERGRIFT, C. EDWARD
7014 AC SKINNER PKWY
SUITE 290
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name

DARRELL E. BOYLES

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

7014 A.C. SKINNER PARKWAY

SUITE 290

City

JACKSONVILLE

FL

Zip Code

32256

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/01

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 DVP
NAME RAY, J G JR
STREET ADDRESS 7014 AC SKINNER PKWY, STE 290
CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Delete

TITLE DVP
NAME FRANCIS, JAMES D
STREET ADDRESS 7014 AC SKINNER PKWY, STE 290
CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Delete

TITLE CFST
NAME GABREE, BRIAN
STREET ADDRESS 416 MAIN STREET
CITY-ST-ZIP LAKE VILLAGE AR 71653 ☒ Delete

TITLE P
NAME VANDERGRIFT, ED
STREET ADDRESS 7014 AC SKINNER PKWY, STE 290
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ Delete

TITLE VP
NAME HEILMAN, BARRY L.
STREET ADDRESS 10550-712, BAYMEADOWS ROAD
CITY-ST-ZIP JACKSONVILLE, FL 32256 ☐ Delete

TITLE S
NAME TWITTEN, TODD G.
STREET ADDRESS 1929 LAKEHALL ROAD
CITY-ST-ZIP LAKE VILLAGE, ARKANSAS 71653 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VPT
NAME DARRELL E. BOYLES
STREET ADDRESS 8837 CANOPY OAKS DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32256 ☐ Change ☒ Addition

TITLE DP
NAME FRANCIS, JAMES D
STREET ADDRESS 7014 A.C. SKINNER PKWY, STE 290
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DARRELL E. BOYLES

4/23/01

Date

(800) 722-0029

Daytime Phone #

CR2E034 (10/00)