

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000061719

1. Entity Name JLR Services, Inc.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90109 007 ***150.00

00058394

DO NOT WRITE IN THIS SPACE

Principal Place of Business 1660 N. Lockwood Ridge Rd. (same)
Mailing Address Sarasota FL 34237

2. Principal Place of Business 1660 N. Lockwood Ridge Rd.
3. Mailing Address 1660 N. Lockwood Ridge Rd.
 Suite, Apt. #, etc.

City & State Sarasota FL
Zip 34237
Country USA

4. FEI Number 65-0937397
Applied For Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Irwin Cooperman
 240 N. Washington Blvd. #300
 Sarasota, FL 34236

7. Name and Address of New Registered Agent
Name E. Blake Melhuish
Street Address (P.O. Box Number is Not Acceptable) 522 Twelfth Street West
City Bradenton **FL** **Zip Code** 34205

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 *E. Blake Melhuish*
 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. ☐ **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 ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President, Director NAME Joseph W. Russo STREET ADDRESS 4981 Sabal Lake Circle CITY-ST-ZIP SARASOTA, FL 34238	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE Vice Pres., Sec., Treasurer NAME Marguerite Russo STREET ADDRESS 4981 Sabal Lake Circle CITY-ST-ZIP SARASOTA, FL 34238	<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: *Joseph W. Russo*
 Signature and typed or printed name of signing officer or director **Date** 5-31-2000 **Daytime Phone #** 941-927-4981

CR2E034 (9/99)