

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90479 023 ***150.00

DOCUMENT # P99000097330

1. Entity Name
KIEFER SOLUTIONS, INC.



Principal Place of Business
**6415 DIAMOND LEAF COURT, NORTH
JACKSONVILLE FL 32244**

Mailing Address
**6415 DIAMOND LEAF COURT, NORTH
JACKSONVILLE FL 32244**

2. Principal Place of Business
2616 WATERSTONE DRIVE
Suite, Apt. #, etc.

3. Mailing Address
2616 WATERSTONE DRIVE
Suite, Apt. #, etc.

City & State
ORANGE PARK, FL

City & State
ORANGE PARK, FL:

4. FEI Number
59-3607953

Applied For
Not Applicable

Zip
32073

Country

Zip
32073

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

KIEFER, LAWRENCE
6415 DIAMOND LEAF COURT, NORTH
JACKSONVILLE FL 32244

7. Name and Address of New Registered Agent

Name
KIEFER, LAWRENCE
Street Address (P.O. Box Number is Not Acceptable)
2616 WATERSTONE DRIVE
City
ORANGE PARK FL Zip Code
32073

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 **LAWRENCE M. KIEFER**
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTS
KIEFER, LAWRENCE M
6415 DIAMOND LEAF CT N.
JACKSONVILLE FL 32244 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
KIEFER, ROSALINDA D
6415 DIAMOND LEAF CT N.
JACKSONVILLE FL 32244 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTS
KIEFER, LAWRENCE M
2616 WATERSTONE DRIVE
ORANGE PARK, FL 32073 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
KIEFER, ROSALINDA D
2616 WATERSTONE DRIVE
ORANGE PARK, FL 32073 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: LAWRENCE M. KIEFER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)