

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000097566

1. Entity Name

EXPORT SERVICES INTERNATIONAL, INC.

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90148 014 \*\*\*150.00

Principal Place of Business

Mailing Address

3721-A WEST MARKET STREET  
GREENSBORO NC 27403

3721-A WEST MARKET STREET  
GREENSBORO NC 27403-1374

2. Principal Place of Business

1737 Jessie Street

3. Mailing Address

1737 Jessie Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville FL

4. FEI Number

58-2508917

Applied For

Not Applicable

Zip

32206

Country

US

Zip

32206

Country

US

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRANT, MOORE, ET. AL.  
50 NORTH LAURA STREET  
SUITE 3100  
JACKSONVILLE FL 32202

Name

Stephen L. Conowall

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

1737 Jessie Street

City

Jacksonville

FL

Zip Code

32206

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

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME CONOWALL, STEPHEN L  
STREET ADDRESS 1812 CARMEL ROAD  
CITY-ST-ZIP GREENSBORO NC 27408

TITLE D ☒ Change ☐ Addition  
NAME Conowall, Stephen L.  
STREET ADDRESS 1214 Queen's Island Ct.  
CITY-ST-ZIP Jacksonville FL 32225

TITLE D ☐ Delete  
NAME CONOWALL, KATHLEEN L  
STREET ADDRESS 1812 CARMEL ROAD  
CITY-ST-ZIP GREENSBORO NC 27408

TITLE D ☒ Change ☐ Addition  
NAME Conowall, Kathleen L.  
STREET ADDRESS 1214 Queen's Island Ct.  
CITY-ST-ZIP Jacksonville FL 32225

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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)(j), 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:

*Stephen L. Conowall*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00

Date

904-353-9969

Daytime Phone #

CR2E034 (9/99)