

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000105552

FILED
Aug 25, 2002
Secretary of State

Entity Name: LORIN'S CAFE, INC.

Current Principal Place of Business:

4130 SALISBURY ROAD STE 1000
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4130 SALISBURY ROAD STE 1000
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3611978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUIR, DAVID J
4120 SALISBURY RD N
SUITE 1000
JACKSONVILLE, FL 32211

Name and Address of New Registered Agent:

CRAIR, DAVID J
413 SALISBURY RD N
SUITE 1000
JACKSONVILLE, FL 32216

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: DAVID J CRAIR

08/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CRAIR, DAVID
Address: 5454 GABLES LANE
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CRAIR, DAVID
Address: 5454 GABLE LANE
City-St-Zip: JACKSONVILLE, FL 32211

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID J CRAIR

D

08/25/2002

Electronic Signature of Signing Officer or Director

Date