

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2003 8:00 am
Secretary of State

07-15-2003 90021 012 ***150.00

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DOCUMENT # P99000110981

1. Entity Name
JLS APPRAISALS, INC.



Principal Place of Business
**121 ALSACE COURT
PONTE VEDRA BEACH FL 32082**

Mailing Address
**121 ALSACE COURT
PONTE VEDRA BEACH FL 32082**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3615739**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SOLDT, JOSEPHINE L
121 ALSACE COURT
PONTE VEDRA BEACH FL 32082**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003, Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PTSD
SOLDT, JOSEPHINE L
121 ALSACE COURT
PONTE VEDRA BEACH FL 32082**

☐ Delete

TITLE
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☐ Change ☐ Addition

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☐ 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 all other like empowered.

SIGNATURE: *Josephine L Soldt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/16/03 804-273-8811
Date Daytime Phone #

CR2E034 (4/03)



✓ Income Tax Service
✓ Financial & Insurance Services
✓ Accounting & Bookkeeping Services

Attachment

90143040

320 Osceola Avenue
Jacksonville Beach, FL 32250
Phone 904/241-2533
Fax: 904/241-1604
www.triplechecktax.com

July 11, 2003

Division of Corporations
Annual Reports Filing
Post Office Box 6327
Tallahassee, FL 32314

Re: Profit corporation Annual Report
Document P99000110981-JLS Appraisals, Inc.

Dear Madam or Sir,

Please see the attached Annual Report for our client referenced above. We are requesting a waiver of the late fee and ask that you accept the enclosed annual report with their full payment of \$150.00, check # 3985.

Mrs. Soldt, President of the above Corporation, did not receive the first report for the current registration period. She notified me of this as soon as she realized that she had not submitted any payment to the State. As we were preparing the UBR Report for her she received the second notice. Mrs. Soldt has always been very conscientious about delivering all of her government paperwork to me and paying all yearly fees timely.

Under penalties of perjury, I declare that the above statement, to the best of my knowledge and belief, is true, correct, and complete.

Thank you for your help with this matter. Please contact me if you have any further questions or concerns.

Respectfully,


William J. Mangine III, EA

Enclosures:

Check # 3985
2003 UBR