

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91524 037 ***150.00

DOCUMENT # 543085

1. Entity Name

The Brodeur Sales Company, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4622 Wadham Ln

3. Mailing Address

4622 Wadham Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-3069724

Applied For

☐ Not Applicable

Zip

32210

Country

USA

Zip

32210

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Richard H. Brodeur, Jr.

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

4622 Wadham Lane

City

Jacksonville

FL

Zip Code

32210

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

Richard H. Brodeur

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

(NOTE: Registered Agent signature required when resigning)

DATE

**9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)**

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE PD/T/C Richard H. Brodeur, Jr.
NAME
STREET ADDRESS 4635 Argonne Lane
CITY-ST-ZIP Jacksonville, FL 32210

TITLE S/D Mary Reilly
NAME
STREET ADDRESS 9127 Runnymede Rd
CITY-ST-ZIP Jacksonville, FL 32210

TITLE V/D Richard H. Brodeur, Jr.
NAME
STREET ADDRESS 4622 Wadham Lane
CITY-ST-ZIP Jacksonville, FL 32210

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard H. Brodeur

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2503AB (12/01)