

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90722 026 ***150.00

DOCUMENT # S43085

1. Entity Name
THE BRODEUR SALES COMPANY, INC.



Principal Place of Business
**4622 WADHAM LANE
JACKSONVILLE FL 32210**

Mailing Address
**4622 WADHAM LANE
JACKSONVILLE FL 32210**

2. Principal Place of Business

3. Mailing Address

4635 Argonne Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Jacksonville FL

4. FEI Number
59-3069722

Applied For
Not Applicable

Zip Country
32210 USA

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

**BRODEUR, RICHARD A JR
4622 WADHAM LANE
JACKSONVILLE FL 32210**

Name

Street Address (P.O. Box Number is Not Acceptable)
4635 Argonne Lane

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 *Richard H Brodeur Jr*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/3/03
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VD** ☐ Delete
NAME **BRODEUR, RICHARD H SR**
STREET ADDRESS **4622 WADHAM LANE**
CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE ☐ Change ☐ Addition
NAME **2054 St. Johns Ave # 1309**
STREET ADDRESS **Jacksonville, FL 32204**
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **REILLY, MARY B. C.**
STREET ADDRESS **9127 RUNNYMEADE ROAD**
CITY-ST-ZIP **JACKSONVILLE FL 32256**

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

TITLE **PTCD** ☐ Delete
NAME **BRODEUR, RICHARD H. JR.**
STREET ADDRESS **4635 ARGONNE LANE**
CITY-ST-ZIP **JACKSONVILLE FL 32210**

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

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: *Richard H Brodeur Jr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/03
Date

Daytime Phone #

CR2E034 (10/02)