## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## S49322 **DOCUMENT #**

1. Entity Name

THE JOHN D. CHAPMAN COMPANY, INC.



## **FILED** Feb 13, 2003 8:00 am Secretary of State 02-13-2003 90238 042 \*\*\*150.00

CHAPMAN, JOHN D.  8431 IMMOKOLEE RD FT PIERCE FL 34951  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 explications of registered agent.  SIGNATORE  SILVATURE  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  INC.  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. Certificate of Status Desired Agent Agent Address of New Registered Agent Agent Agent Address of New Registered Agent Agent Agent Address of New Registered Agent Agent Address of New Registered Agent Agent Agent Agent Address of New Registered Agent Agent Agent Agent Address of New Registered Agent Age	Applied For Not Applicable Additional puired  Code with, and accept  55.00 May Be Added to Fees  CTORS IN 11
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Country  Zip  Country  Sible Agent Address of Current Registered Agent  Name  CHAPMAN, JOHN D.  8431 IMMOKOLEE RD  FT PIERCE FL 34951  City  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 cobligations of registered agent.  SIGNATURE: Registered Agent signature required when reinstating)  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  TILE  Delete  TILE  CHECK HERE IF MAKING CHANG  \$8.75 Fee Req  CHAPMAN, JCHECK HERE IF MAKING CHANGE  \$8.75 Fee Req  To Check HERE IF MAKING CHANGE  \$8.75 Fee Req  Country  5. Certificate of Status Desired \$\bigselect{\text{Status}}\$ Status Desired \$\bigselect{\text{Status}}\$ Status Desired \$\bigselect{\text{Status}}\$ Status Directors  Name  Name  CHAPMAN, JOHN D.  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip  City  FL  Zip  City  FL  Zip  City  FL  Zip  Siblative, typido or printed name of registered agent and title if applicable  (NOTE: Registered Agent signature required when reinstating)  ARE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  TILE  TILE  OFFICERS AND DIRECTORS  TILE  TILE  Check  A. FEI Number  Status Desired  Check  A. FEI Number  Status Desired  Status Desired  (NOTE: Registered Agent signature required when reinstating)  A DOITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  TILE  TILE  Check  TILE  Check  TILE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	Applied For Not Applicable Additional puired  Code with, and accept  55.00 May Be Added to Fees  CTORS IN 11
City & State  City & State  City & State  City & State  Country  Country  Country  Country  Country  Country  Country  Country  Sirper Address of Current Registered Agent  Name  CHAPMAN, JOHN D.  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip  City  Street Address (P.O. Box Number is Not Acceptable)  The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with cobligations of registered agent.  SIGNATORS  Submure, typic of purpose name of registered agent and tell all applicable.  NOTE: Registered Agent signature required when reinstating)  DATE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  TILE  OCHITICAL TILE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  OCHITICAL TILE  Country  5. Certificate of Status Desired  \$8.75 Fee Req  \$8.75 Fee Req  City  FL  City  FL  Zip  City  FL  Zip  City  FL  Zip  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  Characteristics  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  Country  To ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  City  TILE  City  TILE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  City  TILE  City  TILE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  City  Tile  T	Applied For Not Applicable Additional quired  Code with, and accept  55.00 May Be Added to Fees  CTORS IN 11
City & State  City & State  City & State  City & State  Country  Country  Country  Country  Country  Country  5. Certificate of Status Desired   \$8.75   Fee Req  7. Name and Address of New Registered Agent  Name  CHAPMAN, JOHN D.  8431 IMMOKOLEE RD  FT PIERCE FL 34951  City  FL Zip  City  FL Zip  City  FL Zip  City  FL Zip  No. 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. Lam familiar with the obligations of registered agent and title if applicable.  Signature, typed or prived rame of registered agent and title if applicable.  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  III.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  III.  Country  5. Certificate of Status Desired   \$8.75   Fee Req  \$8.75   Fee Req  \$8.75   Fee Req  \$1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  III.  Country  5. Certificate of Status Desired   \$8.75   Fee Req  \$1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  III.  Characteristics  Country  5. Certificate of Status Desired   \$8.75   Fee Req  \$1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  III.  Country  Country  Status Desired   \$1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  III.  Country  Country  Country  Country  Country  Country  Country  Country  Country  Character  Character  Character  Character  Character  Country  Character  Character	Not Applicable Additional juired  Code with, and accept  55.00 May Be Added to Fees CTORS IN 11
Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with explications of registered agent.  SIGNATORE  SILVATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	Code with, and accept  55.00 May Be Added to Fees CTORS IN 11
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Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I aman 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:

172-460-1597