

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90029 017 ***150.00

DOCUMENT # S57777

1. Entity Name
R & D DOWNING, INC.

Principal Place of Business

Mailing Address

~~2222 N TWIN PINES CIR~~
~~JACKSONVILLE FL 32216~~
 US

~~2222 TWIN PINES CIRCLE~~
~~JACKSONVILLE FL 32216~~

2. Principal Place of Business

3. Mailing Address

13981 Sea Prairie Lane

13981 Sea Prairie Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Jacksonville, FL

Jacksonville, FL

Zip

Country

Zip

Country

32224

USA

32224

Durac

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIMPSON, KURT A.
3500 SOUTH THIRD STREET
OCEAN SOUTH
JACKSONVILLE BEACH FL 32250

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **PTD**
 STREET ADDRESS **DOWNING, RICHARD**
 CITY-ST-ZIP ~~2222 TWIN PINES CIRCLE~~
~~JACKSONVILLE FL~~

TITLE ☒ Change ☐ Addition
 NAME **13981 Sea Prairie Lane**
 STREET ADDRESS **Jacksonville, FL**
 CITY-ST-ZIP **32224**

TITLE ☐ Delete
 NAME **VSD**
 STREET ADDRESS **DOWING, DESIREE**
 CITY-ST-ZIP ~~2222 TWIN PINES CIRCLE~~
~~JACKSONVILLE FL~~

TITLE ☒ Change ☐ Addition
 NAME **13981 Sea Prairie Lane**
 STREET ADDRESS **Jacksonville, FL**
 CITY-ST-ZIP **32224**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Desiree Downing 4-30-02

CR2E034 (9/01)