FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State
05-24-2002 91334 011 ***150.00

DOCUMENT # S99863

1. Entity Name: Johns, Bubbers & Johns, P.A.

668590

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1941 Michigan Avenue	1941 Michigan Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Cocoa, FL	City & State: Cocoa, FL
Zip: 32922 Country: USA	Zip: 32922 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3096203 ☐ Applied For ☐ Not Applicable

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: William J. Bubbers

Street Address (P.O. Box Number is Not Acceptable): 1941 Michigan Avenue

City: Cocoa FL Zip Code: 32922

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: William J Bubbers CPA 4/29/02
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) ☐

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D William J. Bubbers 1941 Michigan Avenue Cocoa, FL 32922
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Steven L. Yoakum (D) 1941 Michigan Avenue Cocoa, FL 32922
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: William J Bubbers 4/24/02 321-632-8650
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #