

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V11202

1. Entity Name
J & B GROWERS INC.

Principal Place of Business

4939 125TH AVE. S.
LAKE WORTH FL 33467

Mailing Address

4939 125TH AVE. S.
LAKE WORTH FL 33467

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0309753

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

BRANDT, JERRY
4939 125TH AVE., S.
LAKE WORTH FL 33467

7. Name and Address of New Registered Agent

Name BRENDA JOHNSON
Street Address (P.O. Box Number is Not Acceptable)
4939-125 AVE, SOUTH
City LAKE WORTH FL Zip Code 33467-8225

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

(NOTE: Registered Agent signature required when reinstating)

1-30-01
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, 2001 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

TITLE D
NAME JOHNSON, NANCY
STREET ADDRESS 4939 125TH AVE. S.
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

TITLE D
NAME BRANDT, JERRY
STREET ADDRESS 4939 125TH AVE. S.
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

TITLE D
NAME JOHNSON, CARL
STREET ADDRESS 4939 125TH AVE. S.
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SEC.
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE V.P.
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE PRES.
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE DIRECTOR
NAME BRENDA JOHNSON
STREET ADDRESS 4939-125 AVE. SOUTH
CITY-ST-ZIP LAKE WORTH, FL 33467-8225 ☐ Change ☒ Addition

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-30-01 561 7930544

CR2E034 (10/00)