

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90026 015 ***150.00

03/13/02 08:00 AM

DOCUMENT # V58318

1. Entity Name
J.R. CUSTER, INC.

Principal Place of Business
961 SOUTH FEDERAL HWY
STUART FL 34994
US

Mailing Address
1800 NW BRIGHT RIVER PT
STUART FL 34994
US

509930



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0351533

Applied For

Not Applicable

Zip

Country

Zip

Country

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

THURLOW, III, THOMAS H
17 MARTIN L. KING, JR. BLVD
STUART FL 34994

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 **PD** ☐ Delete
NAME **CUSTER, J.R.**
STREET ADDRESS **1800 NW BRIGHT RIVER PT**
CITY-ST-ZIP **STUART FL**

TITLE **VPD** ☐ Change ☒ Addition
NAME **WILLICH, MANFRED**
STREET ADDRESS **1800 NW BRIGHT RIVER PT**
CITY-ST-ZIP **STUART FL**

TITLE **SD** ☐ Delete
NAME **W. JOAN RODRIGUEZ**
STREET ADDRESS **1125 SASCO HILL ROAD**
CITY-ST-ZIP **FAIRFIELD CT**

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

TITLE **VPD** ☒ Delete
NAME **H. J. RODRIGUEZ**
STREET ADDRESS **1125 SASCO HILL ROAD**
CITY-ST-ZIP **FAIRFIELD CT**

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

TITLE **VPD** ☐ Delete
NAME **H. J. RODRIGUEZ, JR.**
STREET ADDRESS **896 BURR ST.**
CITY-ST-ZIP **FAIRFIELD CT**

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
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STREET ADDRESS
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: JR Custer, Pres. JOANNE CUSTER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-2-02 561-283-7211
Date Daytime Phone #

CR2E034 (9/01)