

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90019 016 ***150.00

DOCUMENT # V62991

1. Entity Name

VANDUSEN AND ASSOCIATES, INC.

Principal Place of Business

Mailing Address

~~1701 THE GREENS WAY
 APT. 1831
 JACKSONVILLE BEACH FL 32250
 US~~

~~1701 THE GREENS WAY
 APT. 1831
 JACKSONVILLE BEACH FL 32082-1333
 US~~

00037335



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

~~91 SAN JUAN DRIVE
 Suite, Apt. #, etc.~~

~~91 SAN JUAN DRIVE
 Suite, Apt. #, etc.~~

~~Unit # H-5
 City & State~~

~~Unit # H-5
 City & State~~

~~PONTE VEDRA BEACH~~

~~PONTE VEDRA BEACH~~

4. FEI Number **59-3147543**

Applied For
 Not Applicable

~~Zip
 32082~~

~~Country
 St. Johns~~

~~Zip
 32082~~

~~Country
 St. Johns~~

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

~~VANDUSEN, JON DAVID
 1701 THE GREENS WAY
 APT. 1831
 JACKSONVILLE BEACH FL 32250~~

Name

Street Address (P.O. Box Number is Not Acceptable)

~~91 SAN JUAN DRIVE~~

~~Unit # H-5~~

~~City
 Ponte Vedra Beach~~

~~FL~~

~~Zip Code
 32082~~

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	VANDUSEN, JON DAVID	1701 THE GREENS WAY, APT. 1831	JACKSONVILLE BEACH FL 32250	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		91 San Juan Drive, Unit # H-5	Ponte Vedra Beach, Florida 32082	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

Jon David Vandusen
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/09/00
 Date

904/543-0422
 Daytime Phone #

CR2F034 (9/99)