

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 08, 2002 8:00 am**  
**Secretary of State**

05-08-2002 90155 023 \*\*\*150.00

**DOCUMENT # P01000083965**

1. Entity Name  
**SJS CONSTRUCTION, INC.**

Principal Place of Business  
**541 PERMENTO AVE  
 JACKSONVILLE FL 32221**

Mailing Address  
**541 PERMENTO AVE  
 JACKSONVILLE FL 32221**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
**P.O. Box 61206**  
 Suite, Apt. #, etc.  
 City & State  
**Jacksonville, FL**  
 Zip Country  
**32236 USA**

4. FEI Number  
**59-3739277**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**HALLOWES, BORDEN R  
 541 PERMENTO AVE  
 JACKSONVILLE FL 32221**

7. Name and Address of New Registered Agent  
 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

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|------|----------------|-------------|---------------------------------|
|       |      |                |             |                                 |
|       |      |                |             |                                 |
|       |      |                |             |                                 |
|       |      |                |             |                                 |
|       |      |                |             |                                 |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE     | NAME              | STREET ADDRESS          | CITY-ST-ZIP            | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
|-----------|-------------------|-------------------------|------------------------|---------------------------------|--|
| President | Sara J. Snead     | 8210 Spencers Trace Dr. | Jacksonville, FL 32244 |                                 |  |
| V-Pres.   | Keith Reed        | 2823 Tanglewood Blvd.   | Jacksonville, FL 32065 |                                 |  |
| Treasurer | John F. Wade, III | 961 Grape Ln.           | Jacksonville, FL 32259 |                                 |  |
| Secretary | Michael A. Kelly  | 195A Roscoe Blvd. S.    | Jacksonville, FL 32082 |                                 |  |
|           |                   |                         |                        |                                 |  |
|           |                   |                         |                        |                                 |  |

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: Sara J. Snead Sara J. Snead - Pres. 4/24/02 (904)786-7556  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)