

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90108 010 ***150.00

DOCUMENT # *F95000002485*
1. Entity Name *Page & Jones, Inc.* ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
52 N. Jackson St.
Suite, Apt. #, etc. *Mobile, AL.*
City & State

3. Mailing Address
P.O. Box 2167
Suite, Apt. #, etc. *Mobile, AL.*
City & State

Zip *36602* Country *USA* Zip *36652* Country *USA*

DO NOT WRITE IN THIS SPACE

4. FEI Number *63-0309800* 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 *Ivey E. Geren*
Street Address (P.O. Box Number is Not Acceptable)
1519 Mulberry Ave.
City *Panama City* FL Zip Code *32405*

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 *Ivey E. Geren* DATE *4-18-02*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	<i>President Michael B. Lee 270 Hillcrest Rd. Mobile, AL. 36608</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Sec/Treas Rufus B. Lee 1174 Mountain Dr. Mobile, AL. 36693</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Exec. Vice Pres. Richard Gates 5314 Yacht Blvd. Mobile, AL. 36619</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 appointed 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 powers.

SIGNATURE: *Michael B. Lee* DATE *4-18-02* (251) 132-1646
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/01)