## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jul 17, 2000 8:00 am Secretary of State **DOCUMENT # 558560** FRIGOLA, DEVANE & DORL, P.A. 07-17-2000 90075 046 \*\*\*550.00 Principal Place of Business Mailing Address P.O. BOX 500177 P.O. BOX 177 SUITE 12 SUITE 12 MARATHON FL 33050-0177 MARATHON FL 33050-2716 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1790130 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRIGOLA, ALFRED K 5701 OVERSEAS HIGHWAY MARATHON, FL 33050 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Delete TITLE PD TITLE NAME NAME FRIGOLA, ALFRED K STREET ADDRESS STREET ADDRESS 2000 SOMBRERO BCH RD CITY-ST-ZIP CITY-ST-ZIP MARATHON, FL 00000 ☐ Addition ☐ Delete TITLE TITLE DEVANÉ, JR WILLIAM N NAME STREET ADDRESS STREET ADDRESS 118 CALLE ENSUENO CITY-ST-ZIP CITY-ST-ZIP MARATHON, FL 00000 - Addition \_ 🗆 Delete \_ - Change TITLE DORL, JAMES J NAME STREET ADDRESS STREET ADDRESS 1138 CALLE ENSANADA CITY-ST-ZIP CITY-ST-7IP MARATHON FL ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS 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.

William NDe Vane, In