

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90007 019 ****61.25

DOCUMENT # 745928

1. Entity Name
DEEDS AND DEDICATION, INC.

Principal Place of Business Mailing Address
3002 GANDY BLVD **P O BOX 13845**
TAMPA FL 33611 **TAMPA FL 33681**
US

004010



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 **59-1897081** 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

HUNT, TIMOTHY
101 E KENNEDY BLVD.
TAMPA FL 33601

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	CICARRELLO, SAM	43 SPANISH MAIN	TAMPA FL				
D	MERSERAU, SCOTT W	866 TIMBER POND DR.	BRANDON FL				
DT	MERSERAU, ARLINE	866 TIMBER POND DR.	BRANDON FL				
D	HOLDER, LUCILLE	4703 LOWELL AVE..	TAMPA FL				
T	COLEMAN, EDITH	2508 KANSAS AVE.	TAMPA FL				
D	MEADOWS, B J, DR	3301 BAYSHORE BLVD #1610	TAMPA FL				

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. F. Ciccarallo REQUIRE Sam F. Ciccarallo 2/12/01 813-984-3491

CR2E037 (10/00)