

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098653

1. Entity Name

D & S PROCESSING COMPANY

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90030 046 ***150.00

Principal Place of Business Mailing Address
20 ARBOR LANE 1140 MAIN ST. ^{#5} 20 ARBOR LANE 1140 MAIN ST.
OLDSMAR FL 34077 DUNEDIN, FL 34698 OLDSMAR FL 34077-2001 SUITE #5
DUNEDIN, FL 34698



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
1140 MAIN ST. 1140 MAIN ST.
Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE #5 SUITE #5
City & State City & State
DUNEDIN, FL DUNEDIN, FL
Zip Country Zip Country
34698 USA 34698 USA

4. FEI Number ☒ Applied For ☐ Not Applicable

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

MONAHAN, CHRISTINA E.
20 ARBOR LANE 667 OAKWOOD DRIVE
OLDSMAR FL 34077 DUNEDIN, FL 34698

Name CHRISTINA E. MONAHAN
Street Address (P.O. Box Number is Not Acceptable)
667 OAKWOOD DRIVE
City DUNEDIN FL Zip Code 34698

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 *Christina E. Monahan* pres CHRISTINA E. MONAHAN, PRESIDENT 3/31/00
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

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 type="checkbox"/> Addition
PRESIDENT (P.V.T.S.)	CHRISTINA E. MONAHAN	667 OAKWOOD DRIVE	DUNEDIN, FL 34698		

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: *Christina E. Monahan* pres CHRISTINA E. MONAHAN, PRESIDENT 3/31/00 727-455-6293
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)