## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # 173953** Apr 05, 2000 8:00 am Secretary of State D.H.N. CORP. 04-05-2000 90077 041 \*\*\*150.00 Principal Place of Business Mailing Address 8015 PALIAMENT CT. 9015 PALIAMENT CT. TALLAHASSEE FL 32308-9793 TALLAHASSEE FL 32308 3. Mailing Address 2. Principal Place of Business P.O. Box 14974 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0697369 Tallahassee FL Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired us 32317-4974 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name POTTER, MARLENE N Street Address (P.O. Box Number is Not Acceptable) 8015 PARLIAMENT CT TALLAHASSEE FL 32308 Zip Code FL 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITLE POTTER, KEITH NAME NAME 628 Renaissance Pointe #306 STREET ADDRESS 491 LINDEBERGH PL. APT 619 STREET ADDRESS Altamonte Springs, FL 32714 CITY-ST-7IP CITY-ST-ZIP ATLANTA GA 30324 ☐ Change Addition ☐ Delete TITLE POTTER, MARLENE N NAME STREET ADDRESS 8015 PARLIAMENT CRT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TALLAHASSEE FL ☐ Delete ☐ Change Addition TITLE POTTER, PHILIP E NAME STREET ADDRESS 8015 PARLIAMENT CRT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL TD Change Addition ☐ Delete TITLE POTTER, LISA S NAME NAME 7510 Sun Key Blvd. # 3311 Winter Park, FL 32792 STREET ADDRESS 4558 ROSWELL RD. APT. O STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30342 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

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:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/00

850-893-8101

Daytime Phone #