

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 365554

1. Entity Name

DUNN'S CREEK FISHING RESORT, INC.

Principal Place of Business

Mailing Address

~~STAR RT 3 BOX 1497~~
SATSUMA FL 32189

~~STAR RT 3 BOX 1497~~
SATSUMA FL 32189

2. Principal Place of Business

3. Mailing Address

861 N. DUNN'S CREEK RD
Suite, Apt. #, etc.

861 N. DUNN'S CREEK RD
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1293000

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

NETTLES, THOMAS T

~~STAR RT. 3, BOX 1497~~
SATSUMA FL 32189

Name

Street Address (P.O. Box Number is Not Acceptable)

861 N. DUNN'S CREEK RD

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

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME NETTLES, THOMAS T
STREET ADDRESS ~~STAR RT. 3, BOX 1497~~
CITY-ST-ZIP SATSUMA, FL 00000 ☐ Delete

TITLE ST
NAME NETTLES, MARY L
STREET ADDRESS ~~STAR RT. 3, BOX 1497~~
CITY-ST-ZIP SATSUMA, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS 861 N. DUNN'S CREEK RD ☒ Change ☐ Addition
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS 861 N. DUNN'S CREEK RD ☒ Change ☐ Addition
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Thomas T. Nettles

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-2-2001

Date

904-325-7772

Daytime Phone #

0580551

CR2E034 (10/00)