

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90197 001 ***450.00

DOCUMENT # 409706

1. Entity Name

DUNEYSTEIN CORPORATION

Principal Place of Business

**531 INDIAN HARBOR RD.
VERO BCH FL 32963**

Mailing Address

**531 INDIAN HARBOR RD.
VERO BCH FL 32963**

2. Principal Place of Business

10880 Orange Ave

Suite, Apt. #, etc.

3. Mailing Address

10880 Orange Ave

Suite, Apt. #, etc.

City & State

Ft. Pierce, Fl.

City & State

Ft. Pierce, Fl.

Zip

Country

34945

Zip

Country

34945

6. Name and Address of Current Registered Agent

**O'HAIRE, MICHAEL
3103 CARDINAL DRIVE
VERO BCH FL 32960**4. FEI Number **59-1454624**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE



7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/25/019. 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

TITLE ☒ Delete**PD
MORRISON, JOHN J
531 INDIAN HARBOR RD
VERO BEACH, FLORIDA**TITLE ☐ Delete**STD
MORRISON, BARBARA J
531 INDIAN HARBOR RD
VERO BEACH, FLORIDA**TITLE ☐ Delete**D
WILLIAMS, LYNN B
531 INDIAN HARBOR RD.
VERO BCH FL 32963**TITLE ☐ Delete**D
LUCIE, SHARON M
3935 ORTEGA BLVD.
JACKSONVILLE FL 32210**TITLE ☐ Delete**D
James Beckley
10880 Orange Ave.
Ft. Pierce, Fl. 34945**TITLE ☐ Delete**D
James Beckley
10880 Orange Ave.
Ft. Pierce, Fl. 34945**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition**DECEASED**TITLE ☒ Change ☐ Addition**2029 Club Dr.
Vero Beach, Fl. 32963**TITLE ☒ Change ☐ Addition**2029 Club Dr.
Vero Beach, Fl. 32963**TITLE ☐ Change ☐ Addition**D
James Beckley
10880 Orange Ave.
Ft. Pierce, Fl. 34945**TITLE ☐ Change ☒ Addition**D
James Beckley
10880 Orange Ave.
Ft. Pierce, Fl. 34945**TITLE ☐ Change ☐ Addition**D
James Beckley
10880 Orange Ave.
Ft. Pierce, Fl. 34945**

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

Date

Daytime Phone #

1/25/01**561-913-3457**

CR2E034 (10/00)