

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90107 015 ***150.00

DOCUMENT # 524095

1. Entity Name

D. DALE HAMILTON, JR., INC.

Principal Place of Business

Mailing Address

**4737 DOLPHIN CAY LN SO
 STE 308
 ST. PETERSBURG FL 33711
 US**

**4737 DOLPHIN CAY LN SO
 STE 308
 ST PETERSBURG FL 33705-6241
 US**

2. Principal Place of Business

3. Mailing Address

6909 9TH STREET

355 ELM DRIVE

Suite, Apt. #, etc.

APT. 402

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

City & State

WAYNESBURG, PA

4. FEI Number

25-1327625

Applied For

Not Applicable

Zip

33705-6241

Country

Zip

15370

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

**HAMILTON, D. DALE, JR.
 4737 DOLPHIN CAY LN SO #308
 ST. PETERSBURG FL 33711**

Name
HAMILTON, D. DALE, JR.

Street Address (P.O. Box Number is Not Acceptable)
6909 9TH STREET NORTH, APT. 402

City
ST. PETERSBURG

FL

Zip Code
33705-6241

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PTD ☐ Delete
 NAME
HAMILTON, D.DALE, JR.
 STREET ADDRESS
4737 DOLPHIN CAY LN SO #308
 CITY-ST-ZIP
ST. PETERSBURG FL

☒ Change ☐ Addition
 TITLE
 NAME
6909 9TH STREET NORTH, APT. 402
 STREET ADDRESS
ST. PETERSBURG, FLORIDA 33705-6241
 CITY-ST-ZIP

TITLE
VS ☐ Delete
 NAME
HAMILTON, KATHERINE
 STREET ADDRESS
4737 DOLPHIN CAY LN SO #308
 CITY-ST-ZIP
ST. PETERSBURG FL

☒ Change ☐ Addition
 TITLE
 NAME
6909 9TH STREET NORTH, APT. 402
 STREET ADDRESS
ST. PETERSBURG, FLORIDA 33705-6241
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

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: *D. Dale Hamilton, Jr.*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/00
 Daytime Phone #

CR2E034 (9/99)