

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91586 026 ***158.75

DOCUMENT # 533128

1. Entity Name

DON MINIE ADVERTISING & MARKETING, INC.

Principal Place of Business

**2500 WINDING CREEK BLVD
 SUITE B-105
 CLEARWATER FL 33761**

Mailing Address

**2500 WINDING CREEK BLVD
 SUITE B-105
 CLEARWATER FL 33761**

2. Principal Place of Business

2436 RHODESIAN DR.

3. Mailing Address

2436 RHODESIAN DR.

Suite, Apt. #, etc.

APT # 44

Suite, Apt. #, etc.

APT # 44

City & State

Clearwater, FLA.

City & State

Clearwater FLA

Zip

33763

Country

U.S.A

Zip

33763

Country

U.S.A

4. FEI Number

59-1741084

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MINIE, DONALD E.

**2500 WINDING CREEK BLVD STE B-105
 CLEARWATER FL 33761**

7. Name and Address of New Registered Agent

Name

DONALD E. MINIE

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

2436 RHODESIAN DR

APT # 44

City

CLEARWATER

FL

Zip Code

33763

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 **Donald E. Minie**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/18/02

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, 2002 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	PRES	<input checked="" type="checkbox"/> Delete
NAME	MINIE, DONALD E.	
STREET ADDRESS	2500 WINDING CREEK BLVD STE B-105	
CITY-ST-ZIP	CLEARWATER FL 33761	

TITLE	VPST	<input checked="" type="checkbox"/> Delete
NAME	MINIE, MARY ELLEN	
STREET ADDRESS	2500 WINDING CREEK BLVD STE B-105	
CITY-ST-ZIP	CLEARWATER FL 33761	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONALD E. MINIE	
STREET ADDRESS	2436 RHODESIAN DR #44	
CITY-ST-ZIP	CLEARWATER, FLA. 33763	

TITLE	VPST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARY ELLEN MINIE	
STREET ADDRESS	2436 RHODESIAN DR #44	
CITY-ST-ZIP	CLEARWATER, FLA. 33763	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

Donald E. Minie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/02

Date

727-791-4856

Daytime Phone #

CR2E034 (9/01)