## **2000 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 549460** Apr 14, 2000 8:00 am Secretary of State 1. Entity Name DOWELS, PINS & SHAFTS, INC. 04-14-2000 90077 009 \*\*\*150.00 Principal Place of Business Mailing Address 1975 CALUMET ST. PO BOX 1135 **CLEARWATER FL 33765 DUNEDIN FL 34697-1135** US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1780438 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MICKELSON, THOMAS & ELLEN Street Address (P.O. Box Number is Not Acceptable) 1975 CALUMET ST CLEARWATER FL 34625 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 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD Change ☐ Addition TITLE ☐ Delete TITLE MICKELSON, THOMAS R NAME NAME STREET ADDRESS 2182 PADDOCK CIRCLE STREET ADDRESS CITY-ST-ZIP **DUNEDIN FL** CITY-ST-ZIP ☐ Addition ☐ Delete Change MICKELSON, ELLEN F NAME 2182 PADDOCK CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DUNEDIN FL** CITY-ST-ZIF Change ☐ Addition TITI F Delete TITLE MICKELSON, ELLEN F NAME NAME 2182 PADDOCK CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DUNEDIN FL** CITY-ST-ZIP ☐ Change ☐ Addition TITI F ☐ Delete TITLE HAMMOND, BRIDGET NAME NAME 696 STILL MEADOWS CIRCLE E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL Change ☐ Addition ☐ Delete TITLE MICKELSON, KEVIN NAME NAME 2182 PADDOCK CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-7IP **DUNEDIN FL** CITY-ST-7IP Change ☐ Addition TITLE ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727 461-1255