

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 637889

1. Entity Name
D.T.L. CORPORATION

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90017 006 ***150.00

Principal Place of Business
1081 9TH STREET & HIGHWAY 50
WINTER GARDEN FL 34787

Mailing Address
P.O. BOX 78-3002
WINTER GARDEN FL 34778-3002

2. Principal Place of Business
1150 St Rd 545
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Winter Garden, FL
Zip
34-778
Country
USA

City & State
Zip
Country

4. FEI Number 59-1933601

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

JOHNSON, LAURA C
1150 ST RD. 545-AVALAN RD
WINTER GARDEN FL 34778

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

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

TITLE	V	REES, JOHN N.	<input type="checkbox"/> Delete
NAME		P.O. BOX 1161	
STREET ADDRESS		WINTER GARDEN FL	
CITY-ST-ZIP			
TITLE	V	PICKELS, JOHN T.	<input type="checkbox"/> Delete
NAME		665 GLENVIEW DR.	
STREET ADDRESS		WINTER GARDEN FL	
CITY-ST-ZIP			
TITLE	V	GOWLAND, JAN E.	<input type="checkbox"/> Delete
NAME		454 23RD ST. S.E.	
STREET ADDRESS		VERO BEACH FL	
CITY-ST-ZIP			
TITLE	STD	JOHNSON, LAURA CLARK	<input type="checkbox"/> Delete
NAME		P.O. BOX 78-3002	
STREET ADDRESS		WINTER GARDEN FL 34778-3002	
CITY-ST-ZIP			
TITLE	D	REES, LINDA J.	<input type="checkbox"/> Delete
NAME		195 E. TILDEN ST.	
STREET ADDRESS		WINTER GARDEN FL	
CITY-ST-ZIP			
TITLE	D	GOWLAND, DEBORAH J.	<input type="checkbox"/> Delete
NAME		454 23RD ST SE	
STREET ADDRESS		VERO BCH. FL	
CITY-ST-ZIP			

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	Frederick T. Johnson	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		P.O. Box 78-3002	
STREET ADDRESS		Winter Garden, FL 34778	
CITY-ST-ZIP			
TITLE	D	Teresa J. Pickels	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		665 Glenview Dr	
STREET ADDRESS		Winter Garden, FL 34787	
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: Laura C. Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-22-01

Date

407-656-3331

Daytime Phone #

CR2E034 (10/00)