

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000000383

1. Entity Name

D & L HOUSE OF LEATHER, INC.

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90057 016 ***150.00

0572490

Principal Place of Business
350 MAIN STREET - ROUTE 28
WEST YARMOUTH MA 02673

Mailing Address
350 MAIN STREET - ROUTE 28
WEST YARMOUTH MA 02673

947485



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 04-3056215

Applied For

Not Applicable

Zip

Country

Zip

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

DONAHUE, DENISE
15 BETH LANE
PALM COAST FL 23117

Name

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

10 Walnut Lane

City

Ormond Beach

FL

Zip Code

32174

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

Denise T. Donahue

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/11/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCST
NAME DONAHUE, DENISE ☐ Delete
STREET ADDRESS 10 WALNUT LANE
CITY-ST-ZIP ORMOND BEACH FL 32174

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

TITLE VC
NAME DONAHUE, WILLIAM ☐ Delete
STREET ADDRESS 10 WALNUT LANE
CITY-ST-ZIP ORMOND BEACH FL 32174

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

TITLE D
NAME CHAREST, DORIS ☐ Delete
STREET ADDRESS 384 LAKESIDE DRIVE
CITY-ST-ZIP MARSTONS HILLS MA 02648

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

TITLE D
NAME ATCHESON, MICHELLE ☐ Delete
STREET ADDRESS 384 LAKESIDE DRIVE
CITY-ST-ZIP MARSTONS HILLS MA

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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

Denise T. Donahue

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENISE T. DONAHUE

Date

4/11/01

Daytime Phone #

(508) 778 4055

CR2E034 (10/00)