

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90158 040 ***150.00

DOCUMENT # F94947

1. Entity Name

VAN DYKE ENTERPRISES, INCORPORATED

Principal Place of Business

**10754-3 SCOTT MILL RD
 JACKSONVILLE FL 32223**

Mailing Address

**10754-3 SCOTT MILL RD
 JACKSONVILLE FL 32223**

2. Principal Place of Business

16962 BRIGADOON TR

3. Mailing Address

16962 BRIGADOON TR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

GULF SHORES, AL

City & State

GULF SHORES, AL

Zip

36542

Country

BALDWIN

Zip

36542

Country

BALDWIN

6. Name and Address of Current Registered Agent

VAN DYKE, DONNA

**10754-3 SCOTT MILL RD
 JACKSONVILLE FL 32223**

7. Name and Address of New Registered Agent

Name

VAN DYKE, DONNA

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

107 BAY LAKE DR

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

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

DONNA VAN DYKE, PRESIDENT 4-22-02

(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, 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 **P** ☐ Delete
 NAME **VAN DYKE, DONNA**
 STREET ADDRESS **10754-3 SCOTT MILL RD**
 CITY-ST-ZIP **JACKSONVILLE FL 32223**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **VAN DYKE, DONNA**
 STREET ADDRESS **107 BAY LAKE DR**
 CITY-ST-ZIP **ORMOND BEACH, FL 32174**

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONNA VAN DYKE, PRESIDENT 4-22-02 251-968-8820

Date

Daytime Phone #

CR2E034 (9/01)