## 2000 UNIFORM BUSINESS REPORT (UBR)

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE NAME

NAME STREET ADDRESS

TITL F

NAME

Name

City

3. Mailing Address

City & State

Suite, Apt. #, etc.

## DOCUMENT # F95000001326

2. Principal Place of Business

**GARY DUNN** 

(See criteria on back)

PDC

2368 PODOCORPUS WAY **CLEARWATER FL 34619** 

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

DUNN, GARY

**DUNN, CAROLE** 

2368 PODOCORPUS WAY

**CLEARWATER FL 34619** 

2368 PODOCARPS WAY

**CLEARWATER FL 34619** 

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE .

TITLE

NAME

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STREET ADDRESS

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CITY-ST-ZIE

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CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NEW PATH CAPITAL ONE, INCORPORATED

Principal Place of Business	Mailing Address
1325 AIRMOTIVE WAY. #220	111A DUNBAR AVE
RENO NV 89502	OLDSMAR FL 34677-2904

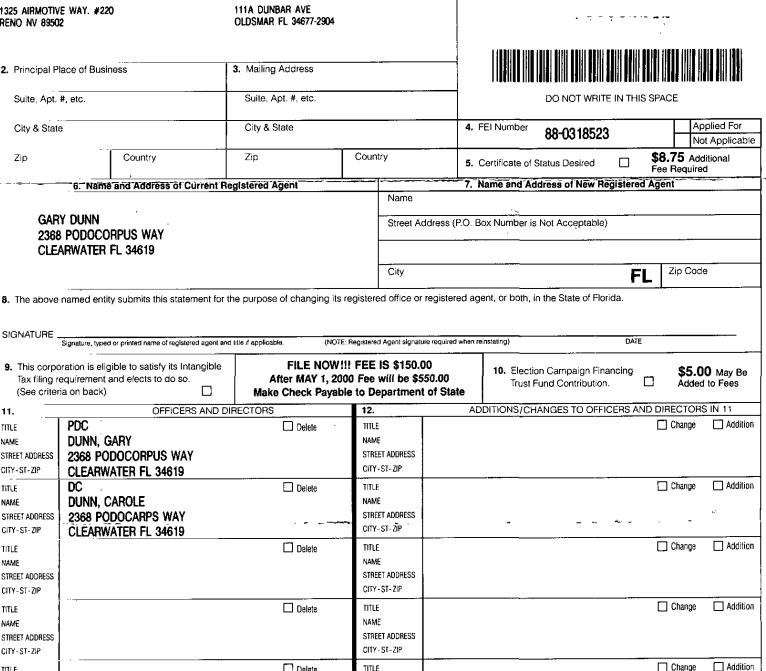
6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

## FILED Apr 17, 2000 8:00 am Secretary of State

04-17-2000 90053 009 \*\*\*150.00



CITY-ST-ZIP CITY-ST-ZIP 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

☐ Change

■ Addition