## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #

F98000000398

CITY-ST-ZIP



Sep 02, 2003 8:00 am Secretary of State 09-02-2003 90181 010 \*\*\*550.00 1. Entity Name W.F. DECKER, INC. Principal Place of Business Mailing Address 15856 DORSET LANE 15856 DORSET LANE FORT MYERS FL 33908 FORT MYERS FL 33908 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 16-0734508 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired. Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DECKER, WALTER F Street Address (P.O. Box Number is Not Acceptable) 15856 DORSET LANE FORT MYERS FL 33908 City 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. I am familiar with, and accept the obligations of registered agent. 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 \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PCDT TITLE ☐ Addition TITLE ☐ Delete DECKER, WALTER F NAME NAME 15856 DORSET LANE STREET ADDRESS STREET ADDRESS FORT MYERS FL CITY-ST-ZIP CITY-ST-ZIP **VD** ☐ Change Addition TITLE ☐ Delete TITLE DECKER, W J NAME NAME 28 PEN WEB PORK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEBSTER NY CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE DECKER, CATHERINE M NAME 41 PEN WEB PARK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEBSTER NY CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE DECKER, PAMELA I NAME 11 PEN WEB PARK STREET ADDRESS STREET ADDRESS WEBSTER NY CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated indicated on this report or supplemental report is true and accurate and that my signature shall have of the corporation or the receiver or trustee empowered to execute this report as required by Chapter changed, or on an attachment with an address

SIGNATURE:

Date Daytime Phone #

Mr. Walter F. Decker 15856 Dorset Ln.

Fort Myers, FL 33908

I am an officer or directo s in Block 10 or Block 11 if

certify that the information

CR2E034 (4/03)