

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003850

1. Entity Name

DAPSERV INC.

FILED

Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90111 042 ***150.00

Principal Place of Business

Mailing Address

311 KETTERING BLVD
DAYTON OH 45439-1972

311 KETTERING BLVD
DAYTON OH 45439

2. Principal Place of Business

3110 KETTERING BLVD

Suite, Apt. #, etc.

3. Mailing Address

3110 KETTERING BLVD

Suite, Apt. #, etc.

City & State

DAYTON, OH

City & State

DAYTON, OH

4. FEI Number

31-1356478

Applied For

Not Applicable

Zip
45439

Country

MONTGOMERY

Zip
45439

Country

MONTGOMERY

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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, 2000 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 PD ☐ Delete
NAME JOHNSTON, JACK W
STREET ADDRESS 67 WISTERIA DR
CITY-ST-ZIP DAYTON OH

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

TITLE VD ☐ Delete
NAME SCHWARTZ, RICHARD W
STREET ADDRESS 141 BALMORAL DR
CITY-ST-ZIP DAYTON OH

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

TITLE S ☐ Delete
NAME ANDERSON, BRUCE E
STREET ADDRESS 434 CORONA AVE
CITY-ST-ZIP DAYTON OH

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

TITLE AS ☐ Delete
NAME METZGER, DAVID E
STREET ADDRESS 2425 BRADSHIRE RD
CITY-ST-ZIP MIAMISBURG OH

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

TITLE TD ☐ Delete
NAME DANA, JEFFREY C
STREET ADDRESS 1968 VISTA OAKS TRL
CITY-ST-ZIP CENTERVILLE OH

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

TITLE D ☒ Delete
NAME FORD, STEPHEN R
STREET ADDRESS 10673 W ONTARIO AVE
CITY-ST-ZIP LITTLETON CO

TITLE ☐ Change ☒ Addition
NAME IDE, ROBERT M
STREET ADDRESS 85 W MEADOW RD
CITY-ST-ZIP HAMDEN, CT 06518

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK W JOHNSTON

01/25/00

Date

937-294-5331

Daytime Phone #

CR2E034 (9/99)