

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000004323

1. Entity Name

D&F REAL ESTATE CO. SHIRE II, INC.

**FILED**  
**Mar 29, 2000 8:00 am**  
**Secretary of State**

03-29-2000 90002 044 \*\*\*150.00

Principal Place of Business

Mailing Address

7200 STONEHENGE DR., STE 211  
RALEIGH NC 27613

7200 STONEHENGE DR., STE 211  
RALEIGH NC 27613-1620

**C0046807**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

9286 Warwick Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
Newport News, VA

4. FEI Number

56-1807062

Applied For

Not Applicable

Zip

Country

Zip

Country

23607

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

HUNTER, DANIEL M  
243 WEST PARK AVE., STE 101  
WINTER PARK FL 32789

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 ☐ Delete  
NAME PD  
STREET ADDRESS FALK SR, DAVID C  
CITY-ST-ZIP 7200 STONEHENGE DR., STE 211  
RALEIGH NC 27613

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

TITLE ☐ Delete  
NAME T  
STREET ADDRESS FALK JR, DAVID C  
CITY-ST-ZIP 7200 STONEHENGE DR., STE 211  
RALEIGH NC 27613

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

TITLE ☐ Delete  
NAME VD  
STREET ADDRESS DRUCKER, ERWIN B  
CITY-ST-ZIP 9286 WARWICK BLVD  
NEWPORT NEWS VA 23607

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

TITLE ☐ Delete  
NAME ST  
STREET ADDRESS DRUCKER, WENDY  
CITY-ST-ZIP 9286 WARWICK BLVD  
NEWPORT NEWS VA 23607

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

TITLE ☐ Delete  
NAME AS  
STREET ADDRESS MUNICK, JOHN  
CITY-ST-ZIP 9286 WARWICK BLVD  
NEWPORT NEWS VA 23607

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John A. Munick, Jr.

Date

3-14-00

Daytime Phone #

(757)

928-6201