


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G79609 1. Entity Name DOT-MAR, INC.		
Principal Place of Business 2700 SOUTH SANFORD AVENUE SANFORD, FL 32773-5252	Mailing Address 2700 SOUTH SANFORD AVENUE SANFORD, FL 32773-5252	

FILED
Jul 24, 2008 08:00 AM
Secretary of State



07162008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2393020	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WARLICK, THOMAS H., ESQUIRE 316 EAST PINE STREET ORLANDO, FL 32801

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BISHOP, RICKY 2700 S SANFORD AVE SANFORD, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GALLAGHER, HANSFORD 307 BIRCH TERRACE WINTER SPRINGS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/24/08-80004-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hansford Gallagher HANSFORD GALLAGHER 7-22-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #