

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90133 026 ***150.00

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1. Entity Name

ROLAND L. DILLEY & SON, INC.

Principal Place of Business	Mailing Address
1354 W. PLEASANT ST. AVON PARK, FL. 33825	P.O. BOX 1666 AVON PARK, FL. 33826

2. Principal Place of Business	3. Mailing Address
1354 W. PLEASANT ST.	P.O. BOX 1666
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
AVON PARK, FL	AVON PARK, FL.
Zip	Country
33825	USA

4. FEI Number	Applied For
59-2767279	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	

DO NOT WRITE IN THIS SPACE

A0063325

6. Name and Address of Current Registered Agent

DILLEY, JAMES R.
 5325 LONG SHOT LANE
 AVON PARK, FL. 33825

7. Name and Address of New Registered Agent

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 *Roland L. Dilley* **DATE** 4/24/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

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

11. OFFICERS AND DIRECTORS	
TITLE	VP ☐ Delete
NAME	HAMMRICK, DAVID O.
STREET ADDRESS	7303 18th. AVE NW
CITY-ST-ZIP	BRADENTON, FL.
TITLE	P ☐ Delete
NAME	DILLEY, ROLAND L.
STREET ADDRESS	510 CRESTVIEW DR.
CITY-ST-ZIP	SEBRING, FL
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
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: *Roland L. Dilley* **DATE** 4/24/01 **863-453-3331**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/1/00)