2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2000 8:00 am
Secretary of State
02-24-2000 90066 019 ***150.00

DOCUMENT # J86885

1. Entity Name

DAV-DAN, INC.

Principal Place of Business	Mailing Address
3563 COMMERICAL WAY 6249 NEWMARK ST. SPRING HILL FL 34606-3948	3563 COMMERICAL WAY 6249 NEWMARK ST. SPRING HILL FL 34606-3948

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5104 Emerson Road Suite, Apt. #, etc.	5104 Emerson Road Suite, Apt. #, etc.
City & State: Brooksville, FL	City & State: Brooksville, FL
Zip: 34601-5740 Country:	Zip: 34601-5740 Country:

4. FEI Number 59-2838162 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SISCO, DAVID HOWARD
~~6249 NEWMARK STREET~~
~~SPRING HILL FL 34606~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5104 Emerson Road

City: Brooksville FL Zip Code: 34601

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: D H Sisco 2/7/00

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PVD SISCO, DAVID HOWARD ~~6249 NEWMARK ST.~~ ~~SPRING HILL FL~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD SISCO, DANITA E. ~~6249 NEWMARK ST.~~ ~~SPRING HILL FL~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	5104 Emerson Road Brooksville, FL 34601-5740	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	5104 Emerson Road Brooksville, FL 34601-5740	☐ Change ☐ Addition
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CR2E034 (9/99)

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: Danita Sisco, Treasurer 2/7/00 352-686-0955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #