

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 23, 2002 8:00 am**  
**Secretary of State**

01-23-2002 90081 015 \*\*\*\*55.00

**DOCUMENT # L01000011966**

1. Entity Name

**D & C INDUSTRIES, LLC**

Principal Place of Business

**6015 EAST 28TH STREET  
 B2  
 BRADENTON FL 34203**

Mailing Address

**6015 EAST 28TH STREET  
 B2  
 BRADENTON FL 34203**

2. Principal Place of Business **WHITFIELD**

**2311-A IND. WAY**

Suite, Apt. #, etc.

3. Mailing Address

**2311-A WHITFIELD IND. WAY**

Suite, Apt. #, etc.

City & State

**SARASOTA - FL**

City & State

**SARASOTA - FL**

4. FEI Number

**65-2311069**

Applied For

☐ Not Applicable

Zip

**34243**

Country

**MANATEE**

Zip

**34243**

Country

**MANATEE**

5. Certificate of Status Desired ☒

**\$5.00** Additional

Fee Required

6. Name and Address of Current Registered Agent

**KINTER, CHARLES  
 6015 EAST 28TH STREET  
 B2  
 BRADENTON FL 34203**

7. Name and Address of New Registered Agent

Name **KINTER, CHARLES**  
 Street Address (P.O. Box Number is Not Acceptable) **2311-A WHITFIELD INDUSTRIAL Way**  
 City **SARASOTA** FL **34243**

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

*Charles P Kinter*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*12 Jan 02*

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR KINTER, CHARLES 6015 EAST 28TH STREET BRADENTON FL 34203</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MEHNERT, DANIEL 6015 EAST 28TH STREET BRADENTON FL 34203</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR KINTER 2311-A WHITFIELD IND. WAY SARASOTA FL 34243</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MEHNERT 2311-A WHITFIELD INDUSTRIAL Way SARASOTA - FL 34243</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

*Charles P Kinter (Manager)* *12 Jan 02* *941-755-6731*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)