

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L13441

1. Entity Name

DOUGLAS J. WEILAND, INC.

Principal Place of Business

2250 DREW ST.
CLEARWATER FL 33761

Mailing Address

3281 LANDMARK DRIVE
CLEARWATER FL 34625

2. Principal Place of Business

3281 Landmark Drive

3. Mailing Address

Suite, Apt. #, etc.

City & State

Clearwater, FL

City & State

Zip

33761

Country

USA

Zip

Country

4. FEI Number

59-2981252

Applied For

Not Applicable

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

WEILAND, DOUGLAS J.
3273 LANDMARK
CLEARWATER FL 34623

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, 2001 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 PD, S, T
NAME WEILAND, DOUGLAS J.
STREET ADDRESS 3273 LANDMARK
CITY-ST-ZIP CLEARWATER FL 33763 ☐ Delete

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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

Date

727-772-0085

Daytime Phone #

CR2E034 (10/00)



DO NOT WRITE IN THIS SPACE