

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L86419

1. Entity Name

DJW PROPERTIES, INC.

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90096 001 ***600.00

68359



DO NOT WRITE IN THIS SPACE

Principal Place of Business %DOUGLAS J WEILAND 2250 DREW ST CLEARWATER FL 34625	Mailing Address %DOUGLAS J WEILAND 2250 DREW ST CLEARWATER FL 34625
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2. Principal Place of Business 3281 Landmark Drive Suite, Apt. #, etc.	3. Mailing Address 3281 Landmark Drive Suite, Apt. #, etc.
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City & State Clearwater, FL	City & State Clearwater, FL	4. FEI Number 59-3021422	Applied For Not Applicable
Zip 33761	Country USA	Zip 33761	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WEILAND, DOUGLAS J 2250 DREW ST CLEARWATER FL 34625
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3281 Landmark Drive City Clearwater FL Zip Code 33761

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 _____ (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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P, S, T WEILAND, DOUGLAS J 2250 DREW ST CLEARWATER FL <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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3281 Landmark Drive Clearwater, FL 33761
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 reports 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)