

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000000904

1. Entity Name
DALTON INVESTMENTS L.C.

FILED

00 JAN 27 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

719 VASSAR STREET
ORLANDO FL 32804

Mailing Address

719 VASSAR STREET
ORLANDO FL 32804-4920



2. Principal Place of Business

720 Rugby St.

Suite, Apt. #, etc.

Suite 200

City & State

Orlando FL

Zip

32804

Country

USA

3. Mailing Address

720 Rugby St.

Suite, Apt. #, etc.

Suite 200

City & State

Orlando, FL

Zip

32804

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3522208

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUMPHRIES, J. GREGORY ESQ.
20 NORTH ORLANDO AVE., SUITE 1000
ORLANDO FL 32801-4626

7. Name and Address of New Registered Agent

Name

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

600003118546--9

-02/01/00--01072--024

*****50.00 *****50.00

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME MGRM DALTON, ROY B JR. ☐ Delete
STREET ADDRESS 719 VASSAR STREET
CITY- ST- ZIP ORLANDO FL 32804

TITLE NAME MGRM DALTON, LINDA T ☐ Delete
STREET ADDRESS 719 VASSAR STREET
CITY- ST- ZIP ORLANDO FL 32804

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

10. ADDITIONS/CHANGES

TITLE NAME 720 W. Rugby St. ☒ Change ☐ Addition
STREET ADDRESS Ste 200, Orlando, FL 32804
CITY- ST- ZIP

TITLE NAME 720 Rugby St. ☒ Change ☐ Addition
STREET ADDRESS Ste 200
CITY- ST- ZIP Orlando, FL 32804

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

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

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

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

1/25/00 (407) 425-0921

CR2E083 (9/99)