

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90140 033 ****61.25

0045897

DOCUMENT # NO1000002920

1. Entity Name

DISCOVERY VILLAGE, INC.



Principal Place of Business

**107 10TH AVE STE 3
ST PETE BEACH FL 33706**

Mailing Address

**107 10TH AVE STE 3
ST PETE BEACH FL 33706**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3714166**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**DUFFY, G PETER
107 10TH AVE STE 3
ST PETE BEACH FL 33706**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	DUFFY, PETER G	107 10 AVE STE 3	SAINT PETERSBURG FL 33706				
D	MAIER, GARY E	31-02 VINA DEL MAR BLVD	SAINT PETERSBURG FL 33706				
T	DUFFY, DANIELS	122 SUNSET DR.	WAPPINGERS FALLS NY 12590				
T	JOHNSON, KATHLEEN	11 KLARMAN CT	HUNTINGTON STATION NY 11746				

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *A. Peter Duffy*

4/23/03

1-727-363-3966

CR2E037 (10/02)

Attachment
20034601

0010000002920

Last year I included in my \uparrow
Payment, the \$8.75 for the
Certificate of Status, and
did not receive it.