

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90093 018 *****70.00

DOCUMENT # N19148

1. Entity Name

DUNBAR INDUSTRIAL ACTION DEVELOPMENT, INC.

Principal Place of Business

**3901 DR. MARTIN LUTHER KING JR. BLVD.
 #119
 FORT MYERS FL 33916
 US**

Mailing Address

**3901 DR. MARTIN LUTHER KING JR. BLVD.
 #119
 FORT MYERS FL 33916
 US**

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

59-2807416

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**PEREIRA, MOE
 3901 DR. MARTIN LUTHER KING JR. BLVD
 FT. MYERS FL 33916**

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
 NAME CAMPBELL, RAYMOND
 STREET ADDRESS 3155 APACHE ST
 CITY-ST-ZIP FORT MYERS FL

☐ Delete

TITLE BM
 NAME JACKSON, WILLIE
 STREET ADDRESS 2604 ST CHARLES ST.
 CITY-ST-ZIP FORT MYERS FL 33916

☐ Delete

TITLE SD
 NAME BEAZELL, THORNTON
 STREET ADDRESS 1342 COLONIAL BLVD.
 CITY-ST-ZIP FT. MYERS FL

☐ Delete

TITLE T
 NAME MORGAN, MELVIN
 STREET ADDRESS 2196 PAULBO ST.
 CITY-ST-ZIP FT. MYERS FL

☐ Delete

TITLE VP
 NAME SQUIRES, TIMOTHY
 STREET ADDRESS 10501 F.G.C.U. BLVD., S
 CITY-ST-ZIP FT MYERS FL 33965

☐ Delete

TITLE BM
 NAME KITTLES, JOYCE
 STREET ADDRESS 2675 MANGO ST.
 CITY-ST-ZIP FT. MYERS FL

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE BM
 NAME TERESA BROWN
 STREET ADDRESS P.O. Box 370
 CITY-ST-ZIP FT. MYERS, FL 33902-0370

☐ Change ☒ Addition

TITLE BM
 NAME Lec Combs
 STREET ADDRESS P.O. Box 2217
 CITY-ST-ZIP FT. MYERS, FL 33902

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/01 (941) 334-2220

Date

Daytime Phone #

CR2E037 (10/00)

0083119