

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N39642

1. Entity Name

M.A.D. DADS OF GREATER OCALA, INC.

Principal Place of Business

210 N.W. 12 AVENUE
OCALA FL 33475
US

Mailing Address

P.O. BOX 3704
OCALA FL 33478
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

59-3025650

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HADLEY, PATRICK
210 N.W. 12TH AVENUE
OCALA FL 34475

7. Name and Address of New Registered Agent

Name

Larry K. Brown

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

210 N.W. 12TH Avenue

City

Ocala FL 34475

FL

Zip Code
34475

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

Larry K. Brown

3/30/01

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WASHINGTON, FRANK
2030 SW 7TH STREET
OCALA FL 34474 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EDD
HADLEY, PATRICK III
210 NW 12TH AVENUE
OCALA FL 34470 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
RAWLS, ADDIE
P.O. BOX 771929
OCALA FL 34477 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EDD
Larry K. Brown
210 NW 12TH Avenue
Ocala FL 34470 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
Mr. O.B. Samuel, Jr. Secretary
151 SE 8th Street
Ocala FL 34471 ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Larry K. Brown

3/30/01

(352) 629-3100

Daytime Phone #

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90107 026 *****70.00

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DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)