2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000016311

DUSHEK, EDYTHE

FORT MYERS, FL 33905

5681 NEAL RD

Name:

Address:

City-St-Zip:

Entity Name: THREE "D" ENTERPRISES OF LEE COUNTY INC

FILED Jan 13, 2003 Secretary of State

_		D ENTERN MOLO OF LLE O			
Current Principal Place of Business:			New Principal Place of Business:		
5681 NEA FT. MYER	LRD 2S, FL 33905				
Current M	lailing Addre	ss:	New Mailing Address:		
5681 NEA FT. MYER	LRD 2S, FL 33905				
FEI Number	: 65-0988610	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
DUSHEK, RONALD J 912 LINCOLN AVE. LEHIGH ACRES, FL 33972 US			DUSHEK, RONALD J 5681 NEAL RD FT. MYERS, FL 3390		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: RONALD J. DUSHEK				01/13/2003	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
	S AND DIREC	=	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (DUSHEK, ROI 5681 NEAL RO FT. MYERS, F	DAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HANUSCHIK, 20150 WELBO		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HANUSCHIK, 0 20150 WELBO		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: EDYTHE DUSHEK S 01/13/2003