

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P000000-16863

1. Entity Name

DESTIN'S WELL + PUMP, Inc.

FILED

02 JUN 27 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4269 Camellia Circle, E.

Suite, Apt. #, etc.

3. Mailing Address

4269 Camellia Circle, E.

Suite, Apt. #, etc.

05/15/02 90085 046 \$150.00
03/27/01 9006 041 \$150.00

City & State
Jacksonville, Florida

City & State
Jacksonville, Florida

4. FFL Number
59-3625548

Applied For
Not Applicable

Zip
32207

Country
USA

Zip
32207

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Michealyn C. Adams

Street Address (P.O. Box Number is Not Acceptable)
1125 13TH Avenue, N.

City
Jacksonville Beach FL Zip Code
32250

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

Michealyn C. Adams

6/25/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
DESTIN, PAUL A.
4269 Camellia Circle, E.
Jacksonville, FL 32207

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

PAUL A. DESTIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

6/25/02 (904) 5455144

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AAA Business & Tax Services, Inc.

1112 Third Street North, Suite 7
Neptune Beach, Florida 32266

Phone 904-247-8321
Fax 904-247-5342

June 26, 2002

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Destin's Well & Pump, Inc.
Ref. Number P00000016863
Subject: Admin. Dissolution for Annual Report
Periods: 2002 and 2001

Dear Sir/Madam:

My firm, AAA Business & Tax Services, Inc. handles the accounting for Destin's Well & Pump, Inc.

You have received fees for the above Uniform Business Reports for the above years. Apparently, from what I understand after calling your office today, the 2001 report was rejected as filed because it did not include an employer identification number.

The employer identification number is 59-3625548. We are enclosing a newly completed UBR for 2001 and 2002.

You rejected the UBR for 2002 because it had a wrong mailing address on the return. I prepared the return and did not realize at the time that the client had closed his P.O. box.

We sincerely apologize for any inconvenience and we can assure you we have not received any prior notices of dissolution of the corporation until I spoke with your office today.

Sincerely,



Lynn Adams
President

Enclosures