

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000025647

FILED  
Apr 19, 2002 8:00 AM  
Secretary of State

**Entity Name:** DOLEN DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

610 SW 22ND TERRACE  
CAPE CORAL, FL 33991

**New Principal Place of Business:**

**Current Mailing Address:**

610 SW 22ND TERRACE  
CAPE CORAL, FL 33991

**New Mailing Address:**

**FEI Number:** 65-0990895

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FELL, DONALD  
610 SW 22ND TERRACE  
CAPE CORAL, FL

**Name and Address of New Registered Agent:**

FELL, SANDRA  
610 SW 22ND TERRACE  
CAPE CORAL, FL

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:** SANDRA S FELL

04/19/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: FELL, DONALD  
Address: 610 SW 22ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

Title: VSD ( ) Delete  
Name: FELL, SANDRA  
Address: 610 SW 22ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FELL, DONALD  
Address: 610 SW 22ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

Title: PSD (X) Change ( ) Addition  
Name: FELL, SANDRA  
Address: 610 SW 22ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

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.

**SIGNATURE:** SANDRA S FELL

P

04/19/2002

Electronic Signature of Signing Officer or Director

Date