

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000092662**1. Entity Name
BRIAN DALEY ENTERPRISES, INC.FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 NOV 19 PM 1:38

Principal Place of Business
**435 S RIDGEWOOD AVE #210
DAYTONA BEACH FL 32114**Mailing Address
**435 S RIDGEWOOD AVE #210
DAYTONA BEACH FL 32114**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
P.O. Box 352214
Suite, Apt. #, etc.
38 WEYANOKE LANE3. Mailing Address
P.O. Box 352214
Suite, Apt. #, etc.
38 WEYANOKE LANECity & State
Palm Coast, FL
City & State
Palm Coast, FL
Zip
32164
Country
USA4. FEI Number
59-3671058
Applied For
☐ Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**6. Name and Address of Current Registered Agent
BELUS, ALLEN
435 S RIDGEWOOD AVE #210
DAYTONA BEACH FL 32114
*Delete*7. Name and Address of New Registered Agent
Name
BRIAN DALEY
Street
P.O. Box 352214
38 WEYANOKE LANE
City
Palm Coast
State
FL
Zip
32164

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 *Brian Daley*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	President	☐ Delete
NAME	Brian Daley	
STREET ADDRESS	38 Weyanoke Ln	
CITY-ST-ZIP	Palm Coast FL 32164	
TITLE	V Pres	☐ Delete
NAME	Edison M Daley	
STREET ADDRESS	38 Weyanoke Ln	
CITY-ST-ZIP	Palm Coast FL 32164	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brian Daley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)