

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000107466

1. Entity Name

HOUSE OF DAVID DISTRIBUTORS, INC.

Principal Place of Business

731 KIRKMAN RD
ORLANDO FL 32811

Mailing Address

731 KIRKMAN RD
ORLANDO FL 32811

2. Principal Place of Business

SAME

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3680243

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CIOLA, THOMAS
731 KIRKMAN RD
ORLANDO FL 32811

7. Name and Address of New Registered Agent

Name GREGORY CIOLA
Street Address (P.O. Box Number is Not Acceptable)
731 KIRKMAN ROAD
City ORLANDO FL Zip Code 32811

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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 D
NAME CIOLA, THOMAS
STREET ADDRESS 731 KIRKMAN RD
CITY-ST-ZIP ORLANDO FL 32811 ☒ Delete

TITLE D
NAME CIOLA, MARCIA
STREET ADDRESS 731 KIRKMAN RD
CITY-ST-ZIP ORLANDO FL 32811 ☒ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT
NAME GREGORY CIOLA
STREET ADDRESS 731 KIRKMAN RD.
CITY-ST-ZIP ORLANDO, FL. 32811 ☐ Change ☒ Addition

TITLE VICE PRESIDENT
NAME PAUL CIOLA
STREET ADDRESS 731 KIRKMAN RD.
CITY-ST-ZIP ORLANDO, FL. 32811 ☐ Change ☒ Addition

TITLE LEAH PONTZIUS
NAME SECRETARY TREASURER
STREET ADDRESS 731 KIRKMAN RD.
CITY-ST-ZIP ORLANDO, FL. 32811 ☐ 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

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:

GREGORY CIOLA

Date

Daytime Phone #

1-4-02 407-298-2953

FILED
Jan 08, 2002 8:00 am
Secretary of State

01-08-2002 90020 045 ***158.75



DO NOT WRITE IN THIS SPACE

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CR2E034 (9/01)