

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90443 003 \*\*\*150.00

**DOCUMENT #**

1. Entity Name

Document DYNAMICS, INC.

PO1000005554 ✓

**DO NOT WRITE IN THIS SPACE**

671699

2. Principal Place of Business

3. Mailing Address

13251 McGregor Blvd

13251 McGregor Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

FT MYERS, FL

106-1

City & State

City & State

FT MYERS, FL

4. FEI Number

651074971

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name: JOHN IPPOLITO

Street Address (P.O. Box Number is Not Acceptable)

6660 DANIEL COURT

City FT MYERS

FL

Zip Code

33908

**DO NOT WRITE  
IN THIS SPACE**

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

05/17/2002

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 P JOHN IPPOLITO  
STREET ADDRESS 6660 DANIEL COURT  
CITY-ST-ZIP FT MYERS, FL 33908

TITLE  
NAME VP LINDA IPPOLITO  
STREET ADDRESS 6660 DANIEL COURT  
CITY-ST-ZIP FT MYERS, FL 33908

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/17/2002

Date

239-454-0005

Daytime Phone #

CR2E034B (12/01)