

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000035814

1. Entity Name
D & P PROPERTY MANAGEMENT, INC.

FILED
Aug 25, 2002 8:00 am
Secretary of State

08-25-2002 90219 042 ***150.00

000/923 AV

Principal Place of Business

223 RANIER COVE #109
CASSELBERRY FL 32707

Mailing Address

223 RANIER COVE #109
CASSELBERRY FL 32707



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2296 River Park Circle
Suite, Apt. #, etc.
#1122

City & State
Orlando, FL

Zip
32817

Country
Orange

3. Mailing Address

2296 River Park Circle
Suite, Apt. #, etc.
#1122

City & State
Orlando, FL

Zip
32817

Country
Orange

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCORMICK, PETER J
223 RANIER COVE #109
CASSELBERRY FL 32707

7. Name and Address of New Registered Agent

Name
Peter McCormick

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

223 Ranier Cove #109

City
Casselberry

FL

Zip Code
32707

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
NAME
D
MCCORMICK, PETER J
STREET ADDRESS
223 RANIER COVE #109
CITY-ST-ZIP
CASSELBERRY FL 32707

☐ Delete

TITLE
NAME
D
ABITINO, DOMINICK
STREET ADDRESS
2296 RIVER PARK CIRCLE #1122
CITY-ST-ZIP
ORLANDO FL 32817

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

SIGNATURE REQUIRED


08/22/02 (407) 402-2335

CR2034 (4/02)

Attachment
Doc. # 001000035814/08/22/02
To Whom it may Concern: 976809
(Florida Dept. of State) (Div. of Corp)

I am sending this letter with my
Original \$150.00 filing. To acknowledge the
fact that I did not receive the prior
notice to file the 2002 Uniform Business
Report. I am asking for this one time
Concession for D3P Property Management, Inc.
This is in accordance with Frequently asked
Questions (8).

Sincerely,


Peter S. McCormick