

## 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 27, 2002 8:00 am  
Secretary of State

03-27-2002 90019 009 \*\*\*150.00

DOCUMENT # P01000074435

1. Entity Name

D.W. CLICK, P.A.

Principal Place of Business

5280 LONESOME DROVE DRIVE  
KISSIMMEE FL 34747

Mailing Address

5280 LONESOME DROVE DRIVE  
KISSIMMEE FL 34747

2. Principal Place of Business

880 Mandalay Ave.

3. Mailing Address

717 E. Oak St.

Suite, Apt. #, etc.

Apt. C208

Suite, Apt. #, etc.

City &amp; State

Clearwater Beach, FL 33769

City &amp; State

Kissimmee, FL

Zip

33767

Country

USA

Zip

34744

Country

USA

4. FEI Number

59-3732441

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SWART, HARRY J  
717 E. OAK STREET  
KISSIMMEE FL 34744

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME CLICK, DENNIS W ☐ Delete  
STREET ADDRESS 5280 LONESOME DROVE DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34747TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D, P, S, T. ☒ Change ☐ Addition  
NAME Click, Dennis W.  
STREET ADDRESS 880 Mandalay Ave. Apt. C208  
CITY-ST-ZIP Clearwater Beach, FL 33767TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-15-02

727-692-8060

CR2E034 (9/01)