

2002 UNIFORM BUSINESS REPORT (UBR)

0042288 AV

DOCUMENT # P01000076246

1. Entity Name

DON MCDANIEL CARPENTRY, INC.

APPROVED
AND
FILED

02 MAR 29 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

9225 BARTLETT AVE
TALLAHASSEE FL 32311

Mailing Address

9225 BARTLETT AVE
TALLAHASSEE FL 32311

2. Principal Place of Business

9225 Bartlett Lane

Suite, Apt. #, etc.

3. Mailing Address

9225 Bartlett Lane

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Tallahassee, FL

Zip 32305

Country

City & State

Tallahassee, FL

Zip 32305

Country

4. FEE Number

59-3736137

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCDANIEL, DON
9225 BARTLETT AVE
TALLAHASSEE FL 32311

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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME MCDANIEL, DON
STREET ADDRESS 9225 BARTLETT AVE
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE V
NAME NICHOLS, PAUL
STREET ADDRESS 21 QUARRY SPRINGS ROAD
CITY-ST-ZIP CRAWFORDVILLE FL 32327 ☐ 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
NAME
STREET ADDRESS 9225 Bartlett Lane
CITY-ST-ZIP Tallahassee, FL 32305 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 200005194592--9
CITY-ST-ZIP -04/05/02--01022--011
****150.00 ****150.00 ☐ 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

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: *Don McDaniel*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: mar. 29, 2002 850-545-6634
Date Daytime Phone #

CR2E034 (9/01)