

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90071 043 ***150.00

DOCUMENT # P01000090799

1. Entity Name
DANNY PADGETT, INC.



Principal Place of Business
3217 SHIMMY LANE
TALLAHASSEE FL 32308

Mailing Address
3217 SHIMMY LANE
TALLAHASSEE FL 32308

2. Principal Place of Business

3. Mailing Address

3039 Concoro Rd

Suite, Apt. #, etc.

City & State
Havana Florida

Zip
32333

Country
USA

City & State
Havana Florida

Zip
32333

Country
USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
59-3744985

Applied For
☒ **Not Applicable**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PADGETT, DANNY RAY
929 ALACHUA AVE.
TALLAHASSEE FL 32308

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

SIGNATURE **Danny R. Padgett**

4-18-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P ☐ Delete
NAME
PADGETT, DANNY R
STREET ADDRESS
3217 SHIMMY LANE 3039 Concoro Rd
CITY-ST-ZIP
TALLAHASSEE FL 32308 Havana FL 32333

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.

SIGNATURE: **Danny R. Padgett** **4/18/03 (850) 294-7396**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)