

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

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90002 024 ***150.00

DOCUMENT # P01000093244

1. Entity Name

DEYOUNG SKEES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

105 N. MELLONVILLE AVE

Suite, Apt. #, etc.

SANFORD, FL

City & State

3. Mailing Address

PO BOX 4105

Suite, Apt. #, etc.

SANFORD, FL

City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3746075

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

Zip

32771

Country

USA

Zip

32772

Country

USA

7. Name and Address of Current Registered Agent

Name

ROBERT J. HUTCHINS

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

400 N WYMORE RD SUITE 110

City

WINTER PARK

FL

Zip Code

32789

**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

**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
STREET ADDRESS
CITY - ST - ZIP

PRESIDENT
JOHN P. SKEES
825 ESCAMBIA DR
SANFORD, FL 32771

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VICE PRESIDENT
JUD DEYOUNG JR
2925 W. COVINGTON DR
DELTONA, FL 32738

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VICE PRESIDENT
STAN T. SKEES III
105 N. MELLONVILLE AVE
SANFORD, FL 32771

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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:

Stan T. Skees III

STAN T. SKEES III

2-27-02

407-323-9543

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)