

FILED
Sep 15, 2003 8:00 am
Secretary of State

09-15-2003 90155 039 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000105921

1. Entity Name
DENNIS GORDON WINDSHIELD WIZARDS, INC.



Principal Place of Business
3820 HEADSAIL DRIVE
NEW PORT RICHEY, FL 34652

Mailing Address
3820 HEADSAIL DRIVE
NEW PORT RICHEY, FL 34652

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3755077

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

GORDON, DENNIS
3820 HEADSAIL DR
NEW PORT RICHEY, FL 34652

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

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

(NOTE: Registered Agent's signature required when submitting)

DATE

FILE NOW! FEE IS \$150.00
As of May 1, 2003 fee will be \$250.00
Amended UBR is \$51.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
GORDON, DENNIS
3820 HEADSAIL DRIVE
NEW PORT RICHEY, FL 34652

☐ Delete

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

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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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2EC34 (10/02)

Attachment 80148212
Dennis Gordon Windshield Wizards, Inc.
3820 Headsail Drive, New Port Richey, FL 34652
*(727)847-7948 * Fax (727)847-0758*

September 11, 2003

DIVISION OF CORPORATIONS
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: DOC# P01000105921

As per my telephone conversation with one of your representatives this morning, enclosed please find our 2003 Uniform Business Report for Profit Corporations along with a check in the amount of \$150.00.

Please waive any late charges, as we did not receive this form to file.

If you have any questions, please contact me at the above telephone number.

Thank you in advance for your help in this matter.

Sincerely,



Dennis Gordon
President

DG/dr

Encl.