

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

01-15-2003 90241 018 ***158.75

DOCUMENT # P02000068239

1. Entity Name

DOLPHIN REALTY, INC.



Principal Place of Business

**202 APOLLO BCH BLVD.
APOLLO BCH FL 33572**

Mailing Address

**202 APOLLO BCH BLVD.
APOLLO BCH FL 33572**

00007933



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

75-3068406

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

KLAHR, HAGEN

**202 APOLLO BCH BLVD.
APOLLO BCH FL 33572**

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 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
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Delete	TITLE	☐ Change ☒ Addition
NAME		NAME	P/D Charles David Barron
STREET ADDRESS		STREET ADDRESS	P.O. Box 155
CITY-ST-ZIP		CITY-ST-ZIP	Shirley, AR 72153
TITLE	☐ Delete	TITLE	☐ Change ☒ Addition
NAME		NAME	V/D Hagen Klahr
STREET ADDRESS		STREET ADDRESS	6325 Balboa Lane
CITY-ST-ZIP		CITY-ST-ZIP	Apollo Beach, FL 33572
TITLE	☐ Delete	TITLE	☐ Change ☒ Addition
NAME		NAME	D/M Edward Currence
STREET ADDRESS		STREET ADDRESS	6319 Cocoa Lane
CITY-ST-ZIP		CITY-ST-ZIP	Apollo Beach, FL 33572
TITLE	☐ Delete	TITLE	☐ Change ☒ Addition
NAME		NAME	S/T Jeanne Burress
STREET ADDRESS		STREET ADDRESS	6325 Balboa Lane
CITY-ST-ZIP		CITY-ST-ZIP	Apollo Beach, FL 33572
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (10/02)

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: *Jeanne Burress* **Jeanne Burress**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/2003 **813-645-8495**
Date Daytime Phone #