

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

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90153 003 ***150.00

DOCUMENT # *P03000136411*

1. Entity Name
Dickson corporation
Flooring, Fencing & painting



14019970

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3027 Yorkshire Dr
Suite, Apt. #, etc.

3. Mailing Address
3027 Yorkshire Dr
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Deltona FL

Zip
32738

Country
Volusia

4. FEI Number
04-3780050

Applied For
☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Madeline Dickson

Street Address (P.O. Box Number is Not Acceptable)
3027 Yorkshire Dr

City
Deltona FL

Zip Code
32738

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 *Madeline S. Dickson*

(NOTE: Registered Agent signature required when reinstating)

4/30/04
DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>President</i> <i>Bryan K Dickson</i> <i>3027 Yorkshire Dr</i> <i>Deltona FL 32738</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>VICE President</i> <i>Madeline S. Dickson</i> <i>3027 Yorkshire Dr</i> <i>Deltona FL 32738</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Secretary</i> <i>Gudelia Serrano</i> <i>2056 Dearing Ave</i> <i>Deltona FL 32725</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Treasurer</i> <i>Jose A. Serrano</i> <i>2056 Dearing Ave</i> <i>Deltona FL 32725</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Bryan K Dickson* **BRYAN K. DICKSON**

4/30/04
Date

(407) 908-1550
Daytime Phone #

CR2E034B (12/02)