

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

01-22-2003 90165 039 ***150.00

DOCUMENT # P92000007225

1. Entity Name
DEREK DEVELOPMENT CORPORATION



Principal Place of Business
600 JEFFERSON ST.
SUITE 610-39
LAFAYETTE LA 70501

Mailing Address
600 JEFFERSON ST.
SUITE 610-39
LAFAYETTE LA 70501



2. Principal Place of Business

341 DOUCET ROAD

Suite, Apt. #, etc.

SUITE B-2

City & State
LAFAYETTE, LA

Zip
70503

Country
LAFAYETTE

3. Mailing Address

341 DOUCET ROAD

Suite, Apt. #, etc.

SUITE B-2

City & State
LAFAYETTE, LA

Zip
70503

Country
LAFAYETTE

☒ **CHECK HERE IF MAKING CHANGES**

4. FEI Number **59-3178696**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ROBIN, ROLAND L
900 GULF SHORE BLVD
UNIT #1
DESTIN FL 32541

7. Name and Address of New Registered Agent

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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ **Delete**
NAME **ROBIN, ROLAND L**
STREET ADDRESS **600 JEFFERSON, SUITE 610**
CITY-ST-ZIP **LAFAYETTE LA 70501**

TITLE **VP** ☐ **Delete**
NAME **ROBIN, DEREK V**
STREET ADDRESS **600 JEFFERSON ST STE., #610-39**
CITY-ST-ZIP **LAFAYETTE LA 70501**

TITLE **STD** ☐ **Delete**
NAME **SHIRLEY, JANITA H**
STREET ADDRESS **600 JEFFERSON ST STE., #610-39**
CITY-ST-ZIP **LAFAYETTE LA 70501**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ **Change** ☐ **Addition**
NAME
STREET ADDRESS **341 DOUCET ROAD, SUITE B-2**
CITY-ST-ZIP **LAFAYETTE, LA 70503**

TITLE ☒ **Change** ☐ **Addition**
NAME
STREET ADDRESS **341 DOUCET ROAD, SUITE B-2**
CITY-ST-ZIP **LAFAYETTE, LA 70503**

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

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/03 **337-993-2221**
Date **Daytime Phone #**

CR2E034 (10/02)