

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90041 046 ***150.00

DOCUMENT # P93000018184

1. Entity Name

DUNMILL HOMES, INC.

Principal Place of Business

**1754 DOCKWAY
 NORTH FORT MYERS FL 33903**

Mailing Address

**46 HYLAND ROAD
 GUELPH. ONT. N1E 1T3
 CA**

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

65-0393581

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

~~**BUTLER, GAREY F
 HUMPHREY & KNOTT PA
 1625 HENDRY ST., SUITE 301
 FORT MYERS FL 33901**~~

7. Name and Address of New Registered Agent

Name **Butler, Gary F.**
 Street Address (P.O. Box Number is Not Acceptable)
~~**Butler, Gary F., 1625 Hendry St., Suite 301**~~
Stowler - White
 City **2201 Second St** FL Zip Code **33901**
Fort Myers

8. The above named entity submits this statement for the purpose of changing its registered office from 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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DUNNINK, JOHN**
 CITY-ST-ZIP **1754 DOCKWAY
 NORTH FT. MYERS FL 33903**

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DUNNINK, LEE J**
 CITY-ST-ZIP **1754 DOCKWAY
 NORTH FT. MYERS FL 33903**

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DUNNINK, TODD M**
 CITY-ST-ZIP **1754 DOCKWAY
 NORTH FT. MYERS FL 33903**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Dunnink
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date **Jan 18/02** Daytime Phone # **519-821-7960**

CR2E034 (9/01)