

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90032 016 \*\*\*150.00

**DOCUMENT # P93000041099**

1. Entity Name

**DAL OF SARASOTA, INC.**

Principal Place of Business

134 SHADY PKWY.  
 SARASOTA FL 34232  
 05

Mailing Address

134 SHADY PKWY.  
 SARASOTA FL 34232-2369  
 05

2. Principal Place of Business

**SAME**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0415180**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**LEE, DEBORAH A**  
**3706 SPAINWOOD DR.**  
**SARASOTA FL 34232**

7. Name and Address of New Registered Agent

Name

**N/A**

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.

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, 2000 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

| TITLE | NAME                     | STREET ADDRESS            | CITY-ST-ZIP                   | <input type="checkbox"/> Delete |
|-------|--------------------------|---------------------------|-------------------------------|---------------------------------|
|       | <b>D</b>                 |                           |                               |                                 |
|       | <b>EVANS, LAWRENCE W</b> | <b>P.O. BOX 25789 N/A</b> | <b>SARASOTA FL 34277-2789</b> |                                 |
|       | <b>D</b>                 |                           |                               |                                 |
|       | <b>LEE, DEBROAH A</b>    | <b>3706 SPAINWOOD DR.</b> | <b>SARASOTA FL 34232</b>      |                                 |
|       |                          |                           |                               |                                 |
|       |                          |                           |                               |                                 |
|       |                          |                           |                               |                                 |
|       |                          |                           |                               |                                 |
|       |                          |                           |                               |                                 |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|------|----------------|-------------|---------------------------------|-----------------------------------|
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |
|       |      |                |             |                                 |                                   |

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:** Deborah A. Lee **Deborah A. LEE** 4/17/00 (941) 252-0300  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)