2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P94000022203**

1. Entity Name

DOLPHIN ENVIRONMENTAL & CONSTRUCTION, INC.

Principal	Place of	Business
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2. Principal Place of Business

5961 ORTEGA RIVER CT

Mailing Address

3. Mailing Address

1333 NORMANDY ACRES IACKSOMULLE FL 32234 5333 NORMANDY ACRES JACKSONVILLE FL 32234-2301

5961 ORTEGA

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State ACKSONUILLE Applied For City & State 4. FEI Number 59-3251447 THCKSON UILL Not Applicable Country u SA Zip \$8.75 Additional 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NEWELL, WANDA L Street Address (P.O. Box Number is Not Acceptable) 5961 ORTEGA RIVER CT 5333 NORMANDY ACRES JACKSONVILLE FL 32234 SPACKSON VILLE 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change TITLE Delete TITLE EWELL, WANDAL NEWELL, WANDA L NAME NAME 61 ORTEGA RIVER CT 5333 NORMANDY ACRES STREET ADDRESS STREET ADDRESS SONUILLE, FL 32244 CITY-ST-ZIP CITY-ST-7IP JACKSONVILLE FL 32234 Change TITLE ☐ Delete BOAROMAN, ROLAND M BOARDMAN, ROLAND M NAME NAME 5961 ORTEGA STREET ADDRESS STREET ADDRESS 5333 NORMANDY ACRES CITY-ST-7/P CITY-ST-ZIP JACKSONVILLE FL 32234 ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY- ST- 7/P CITY-ST-ZIP

RIVER CT

FILED Jan 18, 2000 8:00 am Secretary of State

01-18-2000 90110 016 ***150.00

DO NOT WRITE IN THIS SPACE

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

Yewell WANDA L-NEWELL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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