

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 20, 2000 8:00 am**  
**Secretary of State**

03-20-2000 90005 046 \*\*\*150.00

DOCUMENT # P94000023663

1. Entity Name

J. M. DANIEL REALTY, INC

Principal Place of Business

131 W. BROADWAY ST.  
 Suite C  
 OVIEDO, FL 32765

Mailing Address

2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

131 W. BROADWAY ST

Suite, Apt. #, etc.

Suite C

City & State

OVIEDO, FL

4. FEI Number

59-3231744

Applied For

Not Applicable

Zip

Country

Zip

Country

32765

SEMINOLE

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

C0039355

6. Name and Address of Current Registered Agent

JAMES M. DANIEL, SR.  
 131 W. BROADWAY ST  
 Suite C  
 OVIEDO, FL 32765

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.

SIGNATURE: JAMES M. DANIEL SR. (PRESIDENT)

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/3/00  
 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: PRESIDENT  
 NAME: JAMES M. DANIEL SR  
 STREET ADDRESS: 131 W. BROADWAY ST Suite C  
 CITY-ST-ZIP: OVIEDO FL 32765

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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☐ Change ☐ 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: JAMES M. DANIEL SR. JAMES M. DANIEL SR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/3/00

407-971-0055

Daytime Phone #

CR2E034 (9/99)