

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90367 007 ***158.75

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DOCUMENT # P94000056073

1. Entity Name
MAGASON ENTERPRISES, INCORPORATED

Principal Place of Business 7355 SAMPLE RD CORAL SPRINGS FL 33065 US	Mailing Address 7355 SAMPLE RD CORAL SPRINGS FL 33065 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 7355 Sample Rd.	3. Mailing Address Sample
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Coral Springs FL.	City & State
Zip 33065	Country USA

4. FEI Number 65-0611541	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DICKERSON, GARY 7355 SAMPLE ROAD CORAL SPRINGS FL 33065	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DICKERSON, MARIANNE 7355 SAMPLE RD CORAL SPRINGS FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	* President DICKERSON, Marianne 7355 Sample Rd. Coral Springs, FL 33065 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DICKERSON, GARY 7355 SAMPLE RD CORAL SPRINGS FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	vice President DICKERSON, GARY 7355 Sample Rd. Coral Springs FL 33065 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

Please Note: Just had a wedding for my daughter in our family business - was a very hectic time. This is the first time I was ever late - Please excuse me ????
Thanks - Marianne Dickerson

I hope I filled out this form correctly.
Our titles changed - That's all - Thanks - Marianne Dickerson

13. I hereby certify that the info indicated on this report or of the corporation or the rec changed, or on an attachm
 ted in Sectio
 ave the sarr
 pler 607, Fl

SIGNATURE: *Marianne Dickerson* **Dickerson** **5-17-01**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)