

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90004 020 ***150.00

DOCUMENT # P94000090048

1. Entity Name

DONAIR SALES AND LEASING, INC.

Principal Place of Business

**5275 SOUTH ATLANTIC AVENUE
 #105
 NEW SMYRNA BEACH FL 32169**

Mailing Address

**5275 SOUTH ATLANTIC AVENUE
 #105
 NEW SMYRNA BEACH FL 32169**

914880



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1203 GATWICK LOOP
 Suite, Apt. #, etc.

3. Mailing Address

1203 GATWICK LOOP
 Suite, Apt. #, etc.

City & State

HEATHROW, FLORIDA

City & State

HEATHROW, FLORIDA

4. FEI Number

59-3285526

Applied For

Not Applicable

Zip

32746

Country

USA

Zip

32746

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARRIS, DONALD C
 5275 S ATLANTIC AVE
 UNIT 105
 LONGWOOD FL 32779-3712**

Name

HARRIS, DONALD C.

Street Address (P.O. Box Number is Not Acceptable)

1203 GATWICK LOOP

City

HEATHROW, FLORIDA

FL

Zip Code

32746

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, 2001 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
D
 NAME **HARRIS, DONALD C**
 STREET ADDRESS **5275 S ATLANTIC AVE UNIT 105**
 CITY-ST-ZIP **NEW SMYRNA BEACH FL 32169**

TITLE Change Addition
D
 NAME **HARRIS, DONALD C..**
 STREET ADDRESS **1203 GATWICK LOOP**
 CITY-ST-ZIP **HEATHROW, FL 32746**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
 CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD C HARRIS

2-01-01

Date

407-829-2442

Daytime Phone #

CR2E034 (10/00)