

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 24, 2001 08:00 AM**
Secretary of State**DOCUMENT # P95000055409**1. Entity Name
D & D CLUB, INC.

Principal Place of Business	Mailing Address
1626 90TH AVE	1626 90TH AVE
VERO BEACH FL 32966	VERO BEACH FL 32966

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0597813

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentRICHARDSON DANFORTH K
1626-90TH AVENUE

VERO BEACH FL 32966 US

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 _____ **04/24/2001**

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	AST	<input type="checkbox"/> Delete
NAME	GELLINGER STEVEN	
STREET ADDRESS	1220 29TH AVE	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	ST	<input type="checkbox"/> Delete
NAME	PEREZ TOMAS R	
STREET ADDRESS	2019 CORTEZ AVE	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	VP	<input type="checkbox"/> Delete
NAME	RICHARDSON DANFORTH K	
STREET ADDRESS	1855- 28TH AVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	P	<input type="checkbox"/> Delete
NAME	PIELLENZ HANNS	
STREET ADDRESS	315 ISLAND CREEK DRIVE, J.I.	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STUBBS WILLIAM KING	
STREET ADDRESS	777 37TH STREET	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDSON DANFORTH K	
STREET ADDRESS	1855- 28TH AVE	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIELLENZ HANNS	
STREET ADDRESS	315 ISLAND CREEK DRIVE, J.I.	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: TOMAS RENE PEREZ

ST

04/24/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)