

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000083509

1. Entity Name

DARIN & ASSOCIATES, P.A.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90166 024 ***150.00

Principal Place of Business

% 1101 NORTH LAKE DESTINY RD., SUITE 130
MAITLAND FL 32751

Mailing Address

% 1101 NORTH LAKE DESTINY RD., SUITE 130
MAITLAND FL 32751

2. Principal Place of Business

740 N. Magnolia Avenue
Suite, Apt. #, etc.

3. Mailing Address

740 N. Magnolia Avenue
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Orlando, FL

City & State
Orlando, FL

4. FEI Number 59-3030188

Applied For
Not Applicable

Zip
32803

Country
USA

Zip
32803

Country
USA

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

6. Name and Address of Current Registered Agent

DARIN, JOHN R II
1101 NORTH LAKE DESTINY RD., SUITE 130
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name
Darin, John R II
Street Address (P.O. Box Number is Not Acceptable)
740 N. Magnolia Avenue

City Orlando FL Zip Code 32803

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

JOHN R. DARIN, II, PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

April 26, 2000
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 P
NAME DARIN, JOHN R II
STREET ADDRESS 1101 NORTH LAKE DESTINY RD., #130
CITY-ST-ZIP MAITLAND FL 32751 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME DARIN, JOHN R. II
STREET ADDRESS 740 N. MAGNOLIA AVENUE
CITY-ST-ZIP ORLANDO, FL 32803

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

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John R. Darin, II, President

April 26, 2000 (407) 835-1800
Date Daytime Phone #