


Amended

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000092081 1. Entity Name D.A.C. INVESTMENTS INC.	
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FILED
03 MAR 17 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 6608 14TH ST. W. BRADNETON, FL 34236 US	Mailing Address 6608 14TH ST. W. BRADNETON, FL 34236 US
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2. Principal Place of Business 1426 S. Osprey Ave. Suite, Apt. #, etc.	3. Mailing Address 1426 S. Osprey Ave. Suite, Apt. #, etc.
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☐ CHECK HERE IF MAKING CHANGES

City & State Sarasota, FL	City & State Sarasota, FL
Zip 34239	Zip 34239
Country USA	Country USA

4. FEI Number 65-0665317	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent PREWATT, DANIEL L 6777 BENEVA ROAD SOUTH SARASOTA, FL 34233	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW WITH FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>David Colley</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	3-13-03 (941) 915-3944 Date Daytime Phone #
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CR2E034 (10/02)

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