

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90036 006 ***150.00

DOCUMENT # P96000033110

1. Entity Name

DALLYMASTER, INC.

Principal Place of Business

473 QUAIL RUN
CRAWFORDVILLE FL 32327

Mailing Address

473 QUAIL RUN
CRAWFORDVILLE FL 32327

2. Principal Place of Business

52 Almota Road

Suite, Apt. #, etc.

3. Mailing Address

52 Almota Road

Suite, Apt. #, etc.

City & State

Crawfordville, FL

City & State

Crawfordville, FL

4. FEI Number

59-3384411

Applied For

Not Applicable

Zip

Country

32327

Wakulla

Zip

Country

32327

Wakulla

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

GRIPPO, DENA
473 QUAIL RUN
CRAWFORDVILLE FL 32327

Name

Dena Grippo

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

52 Almota Road

City

Crawfordville

FL

Zip Code

32327

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

Dena Grippo, Secretary Dena Grippo

4-3-01

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
HARRELL, KEITH
473 QUAIL RUN
CRAWFORDVILLE FL 32327 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Harrell, Keith
52 Almota Road
Crawfordville, FL 32327 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
GRIPPO, DENA
473 QUAIL RUN
CRAWFORDVILLE FL 32327 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Grippo, Dena
52 Almota Road
Crawfordville, FL 32327 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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:

Dena Grippo Dena Grippo

4-1-01

850-926-5855

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)