

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P96000040781**1. Entity Name  
**DALMATIAN, INC.**Principal Place of Business  
**1936 14TH AVENUE  
VERO BEACH FL 32960**Mailing Address  
**1936 14TH AVENUE  
VERO BEACH FL 32960**2. Principal Place of Business  
**1601 20th Street**  
Suite, Apt. #, etc.3. Mailing Address  
**1601 20th Street**  
Suite, Apt. #, etc.City & State  
**Vero Beach, FL**City & State  
**Vero Beach, FL**Zip  
**32960**

Country

**Indian River**

Zip

**32960**

Country

**Indian River**

## 6. Name and Address of Current Registered Agent

**CLARK, ROBERT C  
1936 14TH AVENUE  
VERO BEACH FL 32960**4. FEI Number **65-0687881**Applied For  
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

## 7. Name and Address of New Registered Agent

Name

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

**1601 20th Street**

City

**Vero Beach****FL**

Zip Code

**32960**

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

TITLE **PD** ☐ Delete  
NAME **CLARK, ROBERT C**  
STREET ADDRESS **1936 14TH AVENUE**  
CITY-ST-ZIP **VERO BEACH FL**TITLE **VD** ☐ Delete  
NAME **HOWLAND, LARRY**  
STREET ADDRESS **1936 14TH AVENUE**  
CITY-ST-ZIP **VERO BEACH FL**TITLE **TD** ☐ Delete  
NAME **CLASSON, ROBERT**  
STREET ADDRESS **1936 14TH AVENUE**  
CITY-ST-ZIP **VERO BEACH FL**TITLE **SD** ☐ Delete  
NAME **HARDEE, WELLFORD**  
STREET ADDRESS **1936 14TH AVENUE**  
CITY-ST-ZIP **VERO BEACH FL**TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **1601 20th Street**  
CITY-ST-ZIP **Vero Beach, FL 32960**TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **1601 20th Street**  
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CITY-ST-ZIP **Vero Beach, FL 32960**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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: *Robert C. Clark*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-12-01** (561)  
**Robert C. Clark, President 569-4555**

Date

Daytime Phone #

**FILED**  
**Jan 23, 2001 8:00 am**  
**Secretary of State**

01-23-2001 90020 021 \*\*\*150.00

**606580**

DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)