

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000037357

1. Entity Name

D & T'S PIZZAZZ, INC.

**FILED**  
**Apr 12, 2001 8:00 am**  
**Secretary of State**

04-12-2001 90039 025 \*\*\*150.00

Principal Place of Business

660 W. 23RD ST  
PANAMA CITY FL 32405  
US

Mailing Address

2604 PARKWOOD DR  
PANAMA CITY FL 32405  
US

2. Principal Place of Business

3. Mailing Address

P O Box 18379

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PANAMA CITY BEACH FL

4. FEI Number

72-1369655

Applied For

Not Applicable

Zip

Country

Zip

Country

32417

FL

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

DAVIDSON, TODD W  
2523 PELICAN BAY DRIVE  
PANAMA CITY FL 32408

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

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 D  
NAME DAVIDSON, TODD W  
STREET ADDRESS 2604 PARKWOOD DR  
CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Delete

TITLE D  
NAME DAVIDSON, TODD W.  
STREET ADDRESS 2523 PELICAN BAY DRIVE  
CITY-ST-ZIP PANAMA CITY FL 32408 ☒ Change ☐ Addition

TITLE D  
NAME DAVIDSON, DONNA  
STREET ADDRESS 2604 PARKWOOD DR  
CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Delete

TITLE D  
NAME DAVIDSON, DONNA  
STREET ADDRESS 2523 PELICAN BAY DRIVE  
CITY-ST-ZIP PANAMA CITY BEACH FL 32408 ☒ 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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

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:

Donna Davidson (Donna Davidson) 3/06/01 (850) 234-1780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)