

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000066101

1. Entity Name

DI MUCCI REALTY CORPORATION OF FLORIDA

**FILED**  
**Mar 07, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90075 035 \*\*\*150.00

Principal Place of Business

Mailing Address

55 SOUTH ATLANTIC AVENUE #5604  
PONCE INLET FL 32127

4565 SOUTH ATLANTIC AVENUE #5604  
PONCE INLET FL 32127-7088

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

285 West Dundee Rd.

Palatine Illinois

60074

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3463103

Applied For

Not Applicable

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

MAMAN, DAVE  
3422 S. ATLANTIC AVE.  
DAYTONA BEACH FL 32118

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD  
NAME DIMUCCI, ANTHONY P  
STREET ADDRESS 100 WEST DUNDEE ROAD  
CITY-ST-ZIP PALATINE IL 60067 ☐ Delete

TITLE P/S/T  
NAME DiMucci, Anthony P.  
STREET ADDRESS 285 W. Dundee Road  
CITY-ST-ZIP Palatine, IL 60074 ☒ Change ☐ Addition

TITLE VASD  
NAME DIMUCCI, YVONNE  
STREET ADDRESS 100 WEST DUNDEE ROAD  
CITY-ST-ZIP PALATINE IL 60067 ☒ Delete

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

TITLE VP  
NAME OSBURN, CARL F  
STREET ADDRESS 4565 SOUTH ATLANTIC AVENUE #5604  
CITY-ST-ZIP PONCE INLET FL 32127 ☒ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)