

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90194 040 ***150.00

DOCUMENT # P97000081662**1. Entity Name**
DON & DENISE INC.**Principal Place of Business****5247 PARK ST. N.**
ST. PETERSBURG FL 33709**Mailing Address****5247 PARK ST. N.**
ST. PETERSBURG FL 33709**2. Principal Place of Business**

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3472280**Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****SWEENEY, DONALD**
5247 PARK ST. N.
ST. PETERSBURG FL 33709**7. Name and Address of New Registered Agent**

Name

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

City

FL

Zip Code

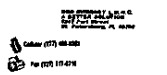
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.**SIGNATURE**

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 \$550.00**
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.**11. OFFICERS AND DIRECTORS****TITLE** **D** ☐ Delete
NAME **SWEENEY, DONALD**
STREET ADDRESS **5247 PARK ST. N.**
CITY-ST-ZIP **ST. PETERSBURG FL 33709****TITLE** **D** ☐ Delete
NAME **HUGHES-CONLON, DENISE**
STREET ADDRESS **3735 ALABAMA AVE. N.**
CITY-ST-ZIP **ST. PETERSBURG FL 33703****TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11****TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
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CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ 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:****SIGNATURE REQUIRED**
Donald H. Sweeney **7/28/01 (727) 458-6353**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Attachment

P9700008162
B0001361

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

July 28, 2001

Re: Don and Denise, Inc.

Uniform Business Report

To Whom It May Concern,

Please accept our check for \$150 for the 2001 Uniform Business Report. Until we received the enclosed notice from your office we had no prior notification that any monies were due. Don and Denise, Inc. are just two people, no secretaries or assistants. We have an excellent credit rating and we always pay our bills as they come in. This is the first time anything like this has occurred with government business. Because we did not receive anything from your office this year the fee simply wasn't paid. I apologize for this oversight on our end and ask you accept our enclosed check, rather than penalizing us when we didn't get your bill on time.

Sincerely,