

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000096744

1. Entity Name

DRH & ASSOCIATES, CORP.

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90132 004 ***150.00

Principal Place of Business

8801 HUNTER'S LAKE DR
APT 126
TAMPA FL 33647

Mailing Address

PO BOX 290511
TAMPA FL 33647

2. Principal Place of Business

5701 MARINER ST

Suite, Apt. #, etc.

503 A

3. Mailing Address

P.O. BOX 26872

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

59-3496383

Applied For

Not Applicable

Zip

33609

Country

Hillsborough

Zip

33623-6872

Country

Hills.

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

HURST, DUDLEY

8801 HUNTER'S LAKE DR
APT 126
TAMPA FL 33647

Name

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

5701 MARINER ST.

APT 503 A

City

TAMPA

FL

Zip Code

33609

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

4-25-01

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 ☐ Delete
NAME HURST, DUDLEY ✓
STREET ADDRESS 8801 HUNTER'S LAKE DR APT 126
CITY-ST-ZIP TAMPA FL 33647

TITLE PRESIDENT ☒ Change ☐ Addition
NAME
STREET ADDRESS 5701 MARINER ST. 503 A
CITY-ST-ZIP TAMPA, FL 33609

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dudley Hurst, President

4-25-01

Date

Daytime Phone #

CR2E034 (10/00)