

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State
 03-22-2000 90034 032 ***150.00

DOCUMENT # P98000012811

1. Entity Name

D D R & ASSOCIATES, INC.

Principal Place of Business

**11509 E DR. MARTIN LUTHER KING, JR BLVD
 MANGO FL 33550**

Mailing Address

**PO BOX 1187
 MANGO FL 33550-1187**

2. Principal Place of Business

3. Mailing Address

P.O. BOX 1067

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Valrico, FL

4. FEI Number

59-3498861

Applied For

Not Applicable

Zip

Country

Zip

Country

33594

USA

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

**ROGERS, DENNIS D
 214 ALADANA DR
 SEFFNER FL 33584**

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. ☐

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PS
 ELDRIDGE, GEORGE T
 P.O. BOX 1187
 MANGO FL 33550**

☒ Delete

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP
**PTS
 ROGERS, DENNIS D
 214 ALADANA DR
 SEFFNER FL 33584**

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 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:

Dennis D. Rogers (President)

3/17/00

813-986-1924

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)