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1. Entity Name LIN-DAL, INC.

Principal Place of Business

2. Principal Place of Business

MORGAN, DALE G

840 6TH AVENUE WEST **BRADENTON FL 34205**

MORGAN, DALE G

PALMETTO FL 34221

MORGAN, LINDA D

PALMETTO FL 34221

3009 6TH AVENUE WEST

3009 6TH AVENUE WEST

840 6TH AVENUE WEST

Suite, Apt. #, etc.

City & State

Zip

BRADENTON FL 34205

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SIGNATURE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. (See criteria on back)

11.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE

STREET ADDRESS

CITY-ST-ZIE

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	STREET ADDRESS
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	NAME
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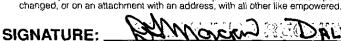
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TITLE

) NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-SI-ZIP
indicated on this report or supplemental report is true and accurate and that my	ne exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am an officer or director required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if





2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

City & State

Suite, Apt. #, etc.

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.

Delete

☐ Delete

Delete

☐ Delete

☐ Delete

☐ Delete

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

12.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME

TITLE

NAME

TITLE

MAME

TITLE

NAME

TITLE

Name

City

(NOTE: Registered Agent signature required when reinstating)

840 6TH AVENUE WEST

BRADENTON FL 34205-8517

DOCUMENT # P98000016803

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS



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<u> - </u>	\ <u>u</u>	1-2000	941	-749	8
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FILED

Jan 25, 2000 8:00 am Secretary of State

01-25-2000 90088 006 ***150.00

DO NOT WRITE IN THIS SPACE

65-0811929

7. Name and Address of New Registered Agent

10. Election Campaign Financing

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Trust Fund Contribution.

4. FEI Number

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

5. Certificate of Status Desired

A0010795

Applied For

Not A.....

\$8.75 Additional

Zip Code

\$5.00 May Be

☐ Additio

Addition

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Added to Fees

Change

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DATE

Fee Required