

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000045789

1. Entity Name T. D. Ventures, Inc.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 17 PM 12:42

Principal Place of Business Mailing Address
13535 Feather Sound Dr. 13535 Feather Sound Dr.
Suite #125 Suite #125
Clearwater, FL 33702 Clearwater, FL 33702

2. Principal Place of Business 3. Mailing Address
341 Royal Tern Rd. S. 341 Royal Tern Rd. S.
Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
Ponte Vedra Beach, FL Ponte Vedra Beach, FL
Zip Zip
32082 USA 32082 USA

4. FEI Number 593512370 Applied For Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Terry A. Yimin
13535 Feather Sound Drive
Suite #125
Clearwater FL 33762

7. Name and Address of New Registered Agent
Name Dennis M. Sheehan
Street Address (P.O. Box Number is Not Acceptable)
341 Royal Tern Rd. S.
City Ponte Vedra Beach FL Zip Code 32082

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 *Dennis M. Sheehan* Dennis M. Sheehan, President, Director 08/14/01
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, 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
TITLE D/P/S
NAME TERRY A. YIMIN ☒ Delete
STREET ADDRESS 13535 Feather Sound Dr. Sk #125
CITY-ST-ZIP Clearwater FL 33762

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE D/P/VP/S/T ☒ Change ☒ Addition
NAME Dennis M. Sheehan
STREET ADDRESS 341 Royal Tern Rd. S.
CITY-ST-ZIP Ponte Vedra Beach, FL 32082

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 500004562605--3

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP -08/29/01-8005-8005
***558.75 ***558.75

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 M. Sheehan* Dennis M. Sheehan, President, Director 8/14/01 (904) 783-5503
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/00)