

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am  
Secretary of State

05-03-2001 91162 003 \*\*\*150.00

DOCUMENT # P98000068321

1. Entity Name  
DAY4, INC.

Principal Place of Business

Mailing Address

220 SE 13TH AVENUE  
CAPE CORAL FL 33990

220 SE 13TH AVENUE  
CAPE CORAL FL 33990

2. Principal Place of Business

3. Mailing Address

324 HAWK HAVEN COVE

324 HAWK HAVEN COVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WAYNESVILLE NC

City & State

WAYNESVILLE NC

Zip

Country

28786 USA

Zip

Country

28786 USA

4. FEI Number

65-0855149

Applied For

Not Applicable

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

WILKINSON, MARTY  
220 SE 13TH AVENUE  
CAPE CORAL FL 33990

Name MARTY WILKINSON

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

769 WILSON AVE

City

FORT MYERS

FL

Zip Code

33919

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

*Christine Wilkinson*

4-26-2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VPT ☐ Delete  
NAME WILKINSON, MARTY  
STREET ADDRESS 220 SE 13TH AVENUE  
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE ☒ Change ☐ Addition  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 324 HAWK HAVEN COVE  
CITY-ST-ZIP WAYNESVILLE NC 28786

TITLE PS ☐ Delete  
NAME WILKINSON, CHRISTINE  
STREET ADDRESS 220 SE 13TH AVENUE  
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE ☒ Change ☐ Addition  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 324 HAWK HAVEN COVE  
CITY-ST-ZIP WAYNESVILLE NC 28786

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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:

*Christine Wilkinson* CHRISTINE WILKINSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-01

Date

828-454-5364

Daytime Phone #

CR2E034 (10/00)