2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000080680

1. Entity Name

DEVER DEVELOPMENT COMPANY



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90668 007 ***150.00

| | | | | WE WE | | | | | |
|--|---|-------------------------------|---|-----------------------------|--------------|---|--------------------------------------|---|------------------------------|
| Principal Place of Business 1813 THOMAS DRIVE PANAMA CITY BEACH FL 32408 | | POB | Mailing Address P O BOX 9911 PANAMA CITY BEACH FL 32417 | | | A TABANKAN NIA TANAK MANIN DARIK M | 1111 20 111 0010 1 101 | !! 88 !! 8 1 !! \$! | 1841 5 811 1861 |
| 2. Principal Place of Business | | 3. Mailin | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & | City & State | | | 4. FEI Number 59-3542427 | <u> </u> | - | oplied For ot Applicable |
| Zip Country | | Zip | Zip Countr | | | 5. Certificate of Status Desired | | 8.75 Add | ditional |
| | 6. Name and Address of C | urrent Registered | Agent | | | 7. Name and Address of New F | Registered Ag | ent | |
| And the second second second | | | | -Name | | · · - _ | | | |
| DEVER, M 1813 THO | MITCH DMAS DRIVE | | Street Address | | | P.O. Box Number is Not Acceptable) | | | |
| PANAMA CITY BEACH FL 32408 | | | | | | | | | |
| √ | | | | | | | FL | Zip Cod | |
| 8. The above the obligate SIGNATURE | tions of registered agent. | | | registered office or i | | d agent, or both, in the State of Flo | | niliar with, | and accept |
| | Signature, typed or printed name or register | ed agent and title it applica | iole. (NOTE: | : Hegistered Agent signatur | e required w | then reinstating) | ĐATE | | |
| Afte | ILE NOW!!! FEE IS \$150.0 r May 1, 2003 Fee will be \$5: c Payable to Florida Departm | 50.00 | | | | 9. Election Campaign Fir Trust Fund Contribution | | \$5.0 Addec | 0 May Be I to Fees |
| 10. | OFFICER: | S AND DIRECTORS | 3 | 11. | | ADDITIONS/CHANGES TO OFF | ICERS AND D | IBECTOR | 3 IN 11 |
| TITLE | PST | | ☐ Delete | TITLE | | 7.55.1.16(16) 5(7) 11(4.25) 76 6(7) | | Change | ☐ Addition |
| NAME STREET ADDRESS | DEVER, MITCH 1813 THOMAS DRIVE | | Delete | NAME STREET ADDRESS | | | L | _ Change | LI AQUIGOTI |
| CITY-ST-ZIP | PANAMA CITY FL 32408 | | | CITY-ST-ZIP | | | | | |
| TITLE NAME | | ••• | ☐ Delete | TITLE NAME | | , V 114 | | Change | ☐ Addition |
| STREET ADDRESS CITY-ST-ZIP | | | | STREET ADDRESS CITY-ST-ZIP | | | | | } |
| TITLE NAME | | | ☐ Delete | TITLE | | | | Change | Addition |
| STREET ADDRESS CITY-ST-ZIP | | | | STREET ADDRESS | | - | | | |
| TITLE | | 11.1 | C) Delete | CITY-ST-ZIP | | # B 7 B 2 | | 7.05 | CT Address |
| NAME | | | Delete | TITLE NAME | | | L | Change | Addition |
| STREET ADDRESS | | | | STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | - | CITY-ST-ZIP | | | | | |
| TITLE | | | ☐ Delete | TITLE | | | | Change | Addition |
| NAME | | | | NAME | | | | | ĺ |
| STREET ADDRESS | | | | STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | CITY-ST-ZIP | | | | | |
| TITLE | | | ☐ Delete | TITLE | | - 4440. | |] Change | ☐ Addition |
| NAME | | | | NAME | | | | - | |
| STREET ADDRESS | | | | STREET ADDRESS | | | | | } |
| CITY-ST-ZIP | | | | CITY-ST-ZIP | | | | | |
| 12. Thereby c | ertify that the information supplie | ed with this filing do | on not availfy for t | ha avamption states | dia Casa | ion 110 07/0\/i\ Flasida Outuber I | 7 44 496 | 0.00 | 1 |

12. 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 10 or Block 11 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 DIRECTO

3/12/03

234-5555 Daytime Phone #