## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 17, 2002 8:00 am Secretary of State P98000088729 **DOCUMENT #** 1. Entity Name DANISON CONSTRUCTION, INC. 05-17-2002 90012 001 \*\*\*150.00 Principal Place of Business Mailing Address 13964 77TH PLACE NORTH 13964 77TH PLACE NORTH ROYAL PALM BEACH FL 33412 ROYAL PALM BEACH FL 33412 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0872106 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent DANISON, MICHELE 13964 77TH PLACE NORTH **ROYAL PALM BEACH FL 33412** City 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 (NOTE: Registered Agent signature required when reinstating) to satisfy its Intangible FILE NOW!!! FEE.IS \$150.00 Tax filing requirement and elects to do so. - 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 . \$5:00 May Be (See criteria on back) Make Check Payable to Department of State Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE DANISON, JEFFREY A Addition NAME 13964 77TH PLACE NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **ROYAL PALM BEACH FL 33412** CITY-ST-ZIP TITI F ☐ Delete TITLE □ Change DANISON, MICHELE ☐ Addition NAME NAME STREET ADDRESS 13964 77TH PLACE NORTH STREET ADDRESS CITY-ST-ZÍP ROYAL PALM BEACH FL 33412 CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete NAME Change ☐ Addition NAME STREET ADDRESS

I hereby certify that the information supplied with this filling 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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

CR2E034 (9/01