

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000089188

1. Entity Name

DOLPHIN WEBSITE DESIGN, INC.

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90037 015 \*\*\*150.00

Principal Place of Business

Mailing Address

9957 - 132ND STREET  
SEMINOLE FL 33776

9957 - 132ND STREET  
SEMINOLE FL 33776-1613

2. Principal Place of Business

3. Mailing Address

3710 16<sup>th</sup> Ave N.

3710 16 Ave N

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

St. Petersburg Fla

City & State

St. Petersburg Fla

4. FEI Number

59-3540737

Applied For

Not Applicable

Zip

Country

33713

Zip

Country

33713

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

BOICE, CHARLES A  
9957 - 132ND STREET -  
SEMINOLE FL 33776

Name Todd Kirchgraber

Street Address (P.O. Box Numbers Not Acceptable)

3710 16 Ave N.

City

St. Petersburg

FL

Zip Code

33713

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

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

Todd Kirchgraber

(NOTE: Registered Agent signature required when reinstating)

4/6/2000

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, 2000 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 PD ☐ Delete  
NAME KIRCHGRABER, TODD  
STREET ADDRESS 3710 16 AVE N  
CITY-ST-ZIP ST PETERSBURG FL 33713

TITLE P/D/T ☒ Change ☒ Addition  
NAME Todd Kirchgraber  
STREET ADDRESS 3710 16 Ave N.  
CITY-ST-ZIP St Petersburg, Fl 33713

TITLE TD ☒ Delete  
NAME BOICE, CHARLES  
STREET ADDRESS 9957 132ND ST  
CITY-ST-ZIP SEMINOLE FL 33776

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  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Todd Kirchgraber

4/6/2000

DATE

727-327-2578

Daytime Phone #

CR2E034 (9/99)