2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101952

1. Entity Name



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90126 029 ***150.00

DILTS & ASSOCIATES, INC.		
Principal Place of Business 120 LAKESIDE E. DAYTONA BEACH FL 32128	Mailing Address 120 LAKESIDE E. DAYTONA BEACH FL 32128	151
2. Principal Place of Business	3. Mailing Address	

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Section Sect	Suite, Apt. #, etc. Suite, Apt. #, etc.			☐ CHECK HERE IF MAKIN	NG CHANGES		
Section Sect				4. FEI Number 50 0546050	Applied For		
S2128	PORT ORANGE	PORT ORANGE	-	59°3546353			
DILTS, DOUGLAS R 120 LAKESIDE E. DAYTONA BEACH FL 32128 8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation or registered agent, or both, in the State of Florida. I am farm far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation of Florida agent far with, and accept the obligation	Zip Country	32128			Fee Required		
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ineleby denity 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. 3 86 304 JO30

SIGNATURE:

SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICEN OR DIRECTOR

Daytime Phone #