## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

SIGNATURE:

## FILED DOCUMENT # P9900003873 Jul 26, 2000 8:00 am **Secretary of State** DONALD J. KAYTON, INC. 07-26-2000 90009 023 \*\*\*150.00 Principal Place of Business Mailing Address 2620 S TAMIAMI TRAIL 2620 S TAMIAMI TRAIL SARASOTA FL 34239 SARASOTA FL 34239 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 Not Applicable Zip Country ... Zip -Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KAYTON, DONALD J Street Address (P.O. Box Number is Not Acceptable) 2620 S TAMIAMI TRAIL SARASOTA FL 34239 Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE □ Delete Change ☐ Addition TITLE NAME KAYTON, DONALD J NAME STREET ADDRESS 2620 S TAMIAMI TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 TITLE Delete TITLE ☐ Change ☐ Addition NAME HAYS, MICHAEL R NAME STREET ADDRESS 2620 S TAMIAMI TRAIL STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34239 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Hachment AHachment

## DONALD J. KAYTON, INC 2620 S. Tamiami Trail Sarasota, FL 34239

July 20, 2000

Katherine Harris
Secretary of State
Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Ms. Harris:

Enclosed please find filled out and signed the 2000 Uniform Business Report Form and my check for \$150.00.

I have just received this notice. I never received the first notice.

It was never my intention not to comply with its requirements. Mine is a new corporation. I have not made or needed to report any income yet. As this is my first year of incorporation, I have never previously received a Uniform Report. I was not aware of its existence or filing requirement.

I ask if you will accept the \$150 payment in place of the \$550 one requested with the second notice. Please abate me the late filing fee of \$400.

Thank you.

Cordially,

Donald J. Kayton, President

THE PERSON