2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P99000033760 **DOCUMENT #**

1. Entity Name

NICELEY DONE INVESTMENTS, INC.



FILED May 05, 2003 8:00 am Secretary of State 05-05-2003 91430 016 ***150.00

e of Business DR. 32738		Mailing Address 2440 DUMAS DR. DELTONA FL 32738	2440 DUMAS DR.								
lace of Busine	ess	3. Mailing Address	3. Mailing Address								
#, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
e		City & State	City & State			59-3631134					oplied For of Applicable
	Country	Zip	Counti	ry		5. Certificate	of Status Des	ired [.75 Add	ditional
6. Name	and Address of Curre	ent Registered Agent	1			7. Name and	d Address of f	New Regis	tered Age	nt	
MICHAEL D MAS DR EL 32738				Name Street Ad	dress (P.	O. Box Numb	er is Not Acce	ptable)			
1 02/00				City	Dity			.	FL Zip Code		
ions of registe	ered agent. L. Bow						th, in the State	of Florida.	4/30/ DATE	liar with,	and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. , OFFICERS AND DIRECTORS						Tri	ust Fund Contr	ibution.		Added	May Be to Fees
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	DR. 32738 face of Busine #, etc. e 6. Name AICHAEL D IAS DR FL 32738 named entity ions of registe July May 1, 2003 Payable to D BOGER, M 2440 DUMI DELTONA D BOGER, KI PO-BOX-5- FLAGLER-E	Iace of Business #, etc. E Country 6. Name and Address of Curre MICHAEL D IAS DR FL 32738 Inamed entity submits this statement ons of registered agent. Signature, typed or printed name of egistered agent. PLE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 May 1, 2003 Fee will be \$550.00 PAYABLE NOWIMAS DR DELTONA FL 32738 D BOGER, MICHAEL D 2440 DUMMAS DR DELTONA FL 32738 D BOGER, KELLY J PO-BOX-51— FLAGLER-BEACH-FL-32136—	DR. 32738 DELTONA FL 32738 lace of Business	DR. 32738 DELTONA FL 32738 dace of Business	DR. 2440 DUMAS DR. DELTONA FL 32738 Itage of Business	DR. 2440 DUMAS DR. DELTONA FL 32738 face of Business 3. Mailing Address 4, etc. Suite, Apl. #, etc. Suite, Apl. #, etc. Country Zip Country 6. Name and Address of Current Registered Agent Name Name	DR. 2440 DUMAS DR. DELTONA FL. 32738 Isace of Business 3. Mailing Address 4. etc. Current Suite. Apt. #, etc. Country Zip Country Zip Country 5. Certificate Name AlcHAEL D IAS DR Street Address (P.O. Box Numb Als DR FL 32738 City named entity submits this statement for the purpose of changing its registered office or registered agent, or books of registered agent. Significate, hypid or primeter are a suggestered agent and title # applicable. Significate, hypid or primeter are a suggestered agent and title # applicable. Delete Delete Delete TITLE NAME SIRET ADDRESS CITY-ST-2P Delete	DR. 2440 DUMAS DR. DELTONA FL 32738 DELTONA FL 32738 #, etc. Sulte, Apt. #, etc. CHECK Country Zip Country 5. Certificate of Status Dee 6. Name and Address of Current Registered Agent Name 6. Name and Address of Current Registered Agent Name 7. Name and Address of FL 32738 City Street Address (PO. Box Number is Not Acce City Street Address (PO. Box Number is Not Acce City Name and Address of the purpose of changing its registered office or registered agent, or both, in the State one of registered agent. Name N	DELTONA FL 32738 DELTONA FL 32738 Jace of Business Jack of Busi	DELTONA FL 22738 DELTONA FL 22738 3. Molling Address #. efc. Suite, Apt. #. etc. CHECK HERE IF MAKING CH Country Zip Country S. Certificate of Status Desired See Size Size	DR. 2440 DUMAS DR. DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTONA FL. 32738 DELTON

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:

Daytime Phone #