2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000047318

1. Entity Name

Dever Associates, Inc.

FILED
00 JUN 28 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
240 South Cove Road Burlington, VT 05401	240 South Cove Road Burlington, VT 05401

2. Principal Place of Business	3. Mailing Address
8383 South Tamiami Trail	8383 South Tamiami Trail
Suite, Apt. #, etc: Suite 121	Suite, Apt. #, etc.: Suite 121
City & State: Sarasota, FL	City & State: Sarasota, FL
Zip: 34238 Country: U.S.	Zip: 34238 Country: U.S.

DO NOT WRITE IN THIS SPACE

4. FEI Number: 58-2485355 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Leslie Wager Hudock
601 Bayshore Blvd., Suite 700
Tampa, FL 33606

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 ______ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DPT	☐ Change ☒ Addition
NAME	Donald Steele	
STREET ADDRESS	8383 S. Tamiami Trail, Suite 121	
CITY-ST-ZIP	Sarasota, FL 34238	
TITLE	DVPS	☐ Change ☒ Addition
NAME	Lois Steele	
STREET ADDRESS	8383 S. Tamiami Trail, Suite 121	
CITY-ST-ZIP	Sarasota, FL 34238	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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****550.00 ****550.00

SP

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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] Donald Steele 6/21/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #