

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 27, 2001 8:00 am**  
**Secretary of State**  
 04-27-2001 90312 047 \*\*\*150.00

**DOCUMENT # P99000048929**  
 1. \*Entity Name  
**D & N REALTY, INC.**

Principal Place of Business      Mailing Address  
**4611 SOUTHWEST 42ND AVE.**      **4611 SOUTHWEST 42ND AVE.**  
**FORT LAUDERDALE FL 33314**      **FORT LAUDERDALE FL 33314**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**1331 NW Harvest**      **1331 NW Harvest St.**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**Palm Bay, FL**      **Palm Bay, FL**  
 Zip      Country      Zip      Country  
**32907**      **Brevard**      **32907**      **Brevard**

4. FEI Number      Applied For  
**65-0934129**       Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**GALASSO, DANIEL JR.**  
**4611 SOUTHWEST 42ND AVE.**  
**FORT LAUDERDALE FL 33314**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>GALASSO, DANIEL JR.</b> <b>4611 SOUTHWEST 42ND AVE.</b> <b>FORT LAUDERDALE FL 33314</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Galasso Daniel Jr.</b> <b>1331 NW Harvest St.</b> <b>Palm Bay, FL 32907</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Daniel Galasso Jr. Dir.      Date: 4/24/01      Daytime Phone #: (321) 508-1920

CR2E034 (10/00)