

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90109 023 ***150.00

DOCUMENT # P99000052412

1. Entity Name
TOM DAHL INC.



Principal Place of Business
**2130 2ND AVE. N.
ST. PETERSBURG FL 33713**

Mailing Address
**2130 2ND AVE. N.
ST. PETERSBURG FL 33713**

2. Principal Place of Business
7310 E. Shadywoods Ct.
Suite, Apt. #, etc.

3. Mailing Address
7310 E. Shadywoods Ct.
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Floral City, FL
Zip
34436 Country

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Floral City, FL
Zip
34436 Country

4. FEI Number
65-0958315

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**DAHL, THOMAS W
2130 2ND AVE. N.
ST. PETERSBURG FL 33713**

7. Name and Address of New Registered Agent

Name
Dahl, Thomas W.
Street Address (P.O. Box Number is Not Acceptable)
7310 E. Shadywoods Ct
City
Floral City **FL** Zip Code
34436

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Thomas W. Dahl Thomas W. Dahl**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/21/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
P ☐ Delete
NAME
DANL, THOMAS W
STREET ADDRESS
2130 2ND AVE N
CITY-ST-ZIP
SAINT PETERSBURG FL 33713

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P ☒ Change ☐ Addition
NAME
Dahl, Thomas W address
STREET ADDRESS
7310 E. Shadywoods Ct. change
CITY-ST-ZIP
Floral City FL 34436

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Thomas W. Dahl** **4/21/03** (727) 560-1944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)