

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000066227

1. Entity Name

DOBBIN & DOBBIN ENTERPRISES, INC.

Principal Place of Business

5936 BRANDON LN.
PORT ORANGE FL 32127

Mailing Address

5936 BRANDON LN.
PORT ORANGE FL 32127

2. Principal Place of Business

5936 BRANDON LN
Suite, Apt. #, etc.

3. Mailing Address

5936 BRANDON LN
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PORT ORANGE, FL

City & State

PORT ORANGE, FL

4. FEI Number

APPLIED FOR
59-3684883

☒ Applied For
☐ Not Applicable

Zip

32127

Country

U.S.A.

Zip

32127

Country

U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOBBIN, KEVIN
5936 BRANDON LN.
PORT ORANGE FL 32127

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when changing)

2/22/2001
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

TITLE: DPT
NAME: DOBBIN, KEVIN
STREET ADDRESS: 5936 BRANDON LN.
CITY-STATE-ZIP: PORT ORANGE FL 32127 ☐ Delete

TITLE: DVS
NAME: DOBBIN, SHARON
STREET ADDRESS: 5936 BRANDON LN.
CITY-STATE-ZIP: PORT ORANGE FL 32127 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-STATE-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-STATE-ZIP: ☐ Delete

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CITY-STATE-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-STATE-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

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TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Kevin M. Dobbin

KEVIN M. DOBBIN

DATE

2/22/2001 (386) 7608500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE AND PHONE

CR2E034 (10/00)