

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098653

1. Entity Name

D & S PROCESSING COMPANY

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90030 046 ***150.00

Principal Place of Business

Mailing Address

~~20 ARBOR LANE~~ ~~OLDSMAR FL 34077~~ **1140 MAIN ST. SUITE #5**
DUNEDIN, FL 34698

2. Principal Place of Business

3. Mailing Address

1140 MAIN ST.

1140 MAIN ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE #5

SUITE #5

City & State

City & State

DUNEDIN, FL

DUNEDIN, FL

Zip

Country

Zip

Country

34698

USA

34698

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONAHAN, CHRISTINA E.

20 ARBOR LANE 667 OAKWOOD DRIVE
OLDSMAR FL 34077 DUNEDIN, FL 34698

Name

CHRISTINA E. MONAHAN

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

667 OAKWOOD DRIVE

City

DUNEDIN

FL

Zip Code

34698

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

Christina E. Monahan **CHRISTINA E. MONAHAN, PRESIDENT** **3/31/00**

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

(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, 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	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	PRESIDENT (P.V.T.S.)
STREET ADDRESS	CHRISTINA E. MONAHAN
CITY-ST-ZIP	667 OAKWOOD DRIVE DUNEDIN, FL 34698
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Christina E. Monahan **Christina E. Monahan, pres.** **3/31/00** **727-455-6293**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)