## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** May 08, 2000 8:00 am Secretary of State **DOCUMENT # \$04329** 1. Entity Name DAMES POINT CROSSING, INC. 05-08-2000 90054 003 \*\*\*150.00 Principal Place of Business Mailing Address 6132 MERRILL RD 6132 MERRILL RD SUITE 12 SUITE 12 00045685 JACKSONVILLE FL 32277-3489 JACKSONVILLE FL 32211 2. Principal Place of Business 3. Mailing Address 1450-3 San Marco Blvd. 1450-3 San Marco Blvd Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Jacksonville, FL 32207 Jacksonville, FL 32207 59-3031546 Not Applicable 32207 Country Duval \$8.75 Additional Zip 32207 5. Certificate of Status Desired Duval Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name\_ CESERY, JR. W R. Street Address (P.O. Box Number is Not Acceptable) 1450-3 San MarcoBlvd. 6132 MERRILL ROAD SUITE @ JACKSONVILLE FL 32211 Jacksonville Zip Code 7 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Change ☐ Addition ☐ Delete TITLE CESERY, WILLIAM R., JR. NAME 1450-3 San Marco Blvd. 6132 MERRILL ROAD, SUITE 12 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Jacksonville, FL JACKSONVILLE FL Change Addition ☐ Delete TITLE TAYLOR, MARTHA C NAME STREET ADDRESS STREET ADDRESS 1415 PALM AVENUE CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE FL 32207 X Change Addition ☐ Delete TITLE CESERY, BARBARA H NAME NAME 1450-3 San Marco Blvd. 6132 MERRILL ROAD, SUITE 12 STREET ADDRESS STREET ADDRESS 32207 Jacksonville, FL CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32211 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME

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.

STREET ADDRESS

CITY-ST-7IP

NAME

STREET ADDRESS CITY-ST-7IP