

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 02, 2001 8:00 am
Secretary of State

02-02-2001 90253 046 ***150.00

DOCUMENT # S46485

1. Entity Name

DUBOIS MANAGEMENT, INC.

Principal Place of Business

8421 STATE RD. #7
BOYNTON BEACH FL 33437

Mailing Address

P O BOX 3029
BOYNTON BEACH FL 33424
US

2. Principal Place of Business

8075 State Rd. 7

3. Mailing Address

Suite, Apt. #, etc.

City & State

Boynton Beach, FL

City & State

Zip

33437

Country

US

Country

4. FEI Number

65-0260697

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SABERSON, ROGER G.
70 SE 4TH AVE.
DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

Name E Wayne DuBois

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

8075 State Rd. 7

City

Boynton Beach

FL

Zip Code 33437

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 *E. Wayne DuBois*

E. Wayne DuBois, Pres.

1/26/2001

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, 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	D	<input type="checkbox"/> Delete
NAME	DUBOIS, E. WAYNE	
STREET ADDRESS	8421 STATE RD. #7	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DUBOIS, BRETT W.	
STREET ADDRESS	8421 STATE RD #7	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DUBOIS, MARK G.	
STREET ADDRESS	8421 STATE RD #7	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DUBOIS, MONTE D.	
STREET ADDRESS	8421 STATE RD #7	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8075 State Rd. 7	
STREET ADDRESS	Boynton Beach, FL 33437	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8075 State Rd. 7	
STREET ADDRESS	Boynton Beach, FL 33437	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8075 State Rd. 7	
STREET ADDRESS	Boynton Beach, FL 33437	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8075 State Rd. 7	
STREET ADDRESS	Boynton Beach, FL 33437	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *E. Wayne DuBois*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. Wayne DuBois

1/26/2001

Date

561.738.7510

Daytime Phone #

CR2E034 (10/00)