

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 02, 2002 8:00 am
Secretary of State

07-02-2002 90806 012 ***550.00

DOCUMENT # **554784**

1. Entity Name

D.B. Furlong, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4119 Canoga Park Dr

Suite, Apt. #, etc.

3. Mailing Address

PO Box 2295

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Brandon

City & State

Tampa FL

4. FEI Number

59-3066865

Applied For

☐ Not Applicable

Zip

33511

Country

USA

Zip

33601-2295

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **Donald B Furlong**

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

4119 Canoga Park Dr

City **Brandon**

FL

Zip Code **33511**

**DO NOT WRITE
IN THIS SPACE**

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 date if applicable.

(NOTE: Registered Agent signature is required when re-designing)

DATE

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so. ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **President**
NAME **Donald B. Furlong**
STREET ADDRESS **4119 Canoga Park Dr.**
CITY-ST-ZIP **Brandon, FL 33511**

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 807, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address with all other like empowered.

SIGNATURE **Donald B. Furlong** **Donald B. Furlong President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

CR2E034B (12/01)

(813)

6/27/02 286-3875