2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 07, 2000 8:00 am DOCUMENT # **F06400** 1. Entity Name Secretary of State DAMPIER SEPTIC TANK, INC. 03-07-2000 90040 045 ***150.00 Mailing Address Principal Place of Business 7030 NW 23RD WAY 7030 NW 23RD WAY GAINESVILLE FL 32653-1636 GAINESVILLE FL 32653 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2040886 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DAMPIER, BETTY Street Address (P.O. Box Number is Not Acceptable) 7030 N.W. 23RD WAY **GAINESVILLE FL 32606** Zip Code City FL 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 reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change Addition STD TITLE ☐ Delete TITLE DAMPIER, BETTY NAME NAME STREET ADDRESS STREET ADDRESS 7030 N.W. 23RD WAY CITY-ST-ZIP CITY-ST-ZIP **GAINESVILLE FL** Change ☐ Addition TITLE ☐ Delete TITLE DAMPIER, WILBUR A NAME NAME STREET ADDRESS STREET ADDRESS 7030 N.W. 23RD WAY CITY-ST-7IP CITY-ST-ZIP GAINESVILLE FL ☐ Addition Change ☐ Delete TITLE TITLE DAMPIER, BRENDA JEAN NAME NAME STREET ADDRESS STREET ADDRESS 7030 N.W. 23RD WAY CITY-ST-ZIP CITY-ST-ZIP **GAINESVILLE FL** ☐ Change ☐ Addition ☐ Delete TITLE TITLE DAMPIER, FREDDIE A NAME NAME STREET ADDRESS STREET ADDRESS 7030 NW 23RD WAY CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32653 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Addition ☐ Change ☐ Delete TITLE TITLE NAME 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-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Fell 08, 2000

352-378-2659

Daytime Phone #