

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:23

DOCUMENT # 637500

(0)

1. Corporation Name

DWAIN FLETCHER COMPANY

Principal Place of Business

P O BOX 410039
MELBOURNE FL 32941-7039

Mailing Address

P O BOX 410039
MELBOURNE FL 32941-7039

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/26/1979

3a. Date of Last Report

03/07/1994

4. FEI Number

58-1383991

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLETCHER, BILLIE JO
2280 HAMLET DR.
MELBOURNE FL 32934

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: (Typed or printed name of registered agent and then if applicable)

(NOTE: Registered Agent signature required when instituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME FLETCHER, CARL D.
STREET ADDRESS 2280 HAMLET DR
CITY ST ZIP MELBOURNE FL

11 TITLE V
12 NAME FLETCHER, MICHAEL D.
13 STREET ADDRESS 4996 Pine Lily Court
14 CITY ST ZIP Melbourne, FL 32940

TITLE VS
NAME FLETCHER, BILLIE JO.
STREET ADDRESS 2280 HAMLET DR
CITY ST ZIP MELBOURNE FL

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

TITLE V
NAME LONG, JOHN E.
STREET ADDRESS 121 BLUFF VIEW
CITY ST ZIP CASTROVILLE TX

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE V
NAME BOATRIGHT, ALANN J.
STREET ADDRESS 13 MACON ST
CITY ST ZIP AURORA CO

41 TITLE
42 NAME Remove Boatright, Alann J.
43 STREET ADDRESS as Vice President
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 113 (07c)(gk), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Billie Jo Fletcher

Billie Jo Fletcher

10 Jan 95

407-779-2429