

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 637889 (7)

1. Corporation Name
D.T.L. CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O LAURA C JOHNSON 1081 9TH & HIGHWAY 50 WINTER GARDEN FL 34787	Mailing Address C/O LAURA C JOHNSON 1081 9TH & HIGHWAY 50 WINTER GARDEN FL 34787
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3. Date Incorporated or Qualified
09/28/1979

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	30

4. FEI Number
59-1933601

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**JOHNSON, LAURA C
 1081 9TH & HWY 50
 WINTER GARDEN FL 34787**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

85 Zip Code **FL**

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 Laura C. Johnson Laura C. Johnson 4-9-98

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	REES, JOHN N.	
STREET ADDRESS	P.O. BOX 1161	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PICKELS, JOHN T.	
STREET ADDRESS	665 GLENVIEW DR.	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GOWLAND, JAN E.	
STREET ADDRESS	454 23RD ST. S.E.	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	JOHNSON, LAURA CLARK	
STREET ADDRESS	1081 9TH & HWY 50	
CITY-ST-ZIP	WINTER GARDEN, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	REES, LINDA J.	
STREET ADDRESS	195 E. TILDEN ST.	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GOWLAND, DEBORAH J.	
STREET ADDRESS	454 23RD ST SE	
CITY-ST-ZIP	VERO BCH. FL	

13. Not Listed: OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	P Fred T. Johnson
1.3 STREET ADDRESS	1081 9th St
1.4 CITY-ST-ZIP	Winter Garden, FL 34787
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	D Teresa J. Pickels
2.3 STREET ADDRESS	665 Glenview Dr
2.4 CITY-ST-ZIP	Winter Garden, FL 34787
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 on an attachment with an address.

SIGNATURE: Laura C. Johnson Laura C. Johnson 4-9-98 407-656-3355

CR2E034 (10/97)