FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000066195 (6)**

1. Corporation Name

D & J SERVICES, INC.

Principal Place of Business	Mailing Address
380 SEMORAN COMMERCE PLACE SUITE A-104 APOPKA FL 32703 US	12600 CHELMSFORD COURT ORLANDO FL 37837 US

2. Principal Place of Business	2a. Mailing Address
21 1055 S. Hiawassee 17/92	26
Suite, Apt. # etc. 22	Suite, Apt. #, etc. 27
City & State 23 Longwood FL	City & State 28
Zip / Country 24 32750 25 Seminole	Zip / Country 29 30

3. Date Incorporated or Qualified	3a. Date of Last Report
08/29/1994	04/07/1995

4. FEI Number: 59-3272530 — ☐ 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

9. Name and Address of Current Registered Agent

WILLIAMSON, DAVID M
12600 CHELMSFORD COURT
ORLANDO FL 32837

10. Name and Address of New Registered Agent

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 607.1505, 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: DAVID WILLIAMSON 4/4/96
Signature of Registered Agent (if changing) — Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	WILLIAMSON, DAVID H	
STREET ADDRESS	12600 CHELMSFORD COURT	
CITY-ST-ZIP	~~KISSIMMEE FL 34741~~	
TITLE	VSTD	☐ DELETE
NAME	WILLIAMSON, JENNIFER C	
STREET ADDRESS	12600 CHELMSFORD COURT	
CITY-ST-ZIP	~~KISSIMMEE FL 34741~~	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP	ORLANDO 32837	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP	ORLANDO 32837	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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 added by an attachment with an address.

SIGNATURE: DAVID WILLIAMSON 4/4/96 407 696 4554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)