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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000082759 (7) 1. Corporation Name

D & M MANAGEMENT, INC.

FILED Jan 16 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | r refutent fra safen ditti kuris estik natis estek sussa tinis tusat usite ibek ione | |
|---|---|------------------------------------|---------------------------|--|--|
| 32 PIRATES WAY 32 PIRATES WAY | | | | | |
| MANTEO NO | MANTEO NC 27954 | | | | |
| 1 | | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified |
| | | | | | 10/08/1996 |
| | lace of Business | 2a. Mailing Address | | | 4. FEI Number Applied For |
| | | | tesway | | ✓ 56-1997838 Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | • | 5. Certificate of Status Desired \$8.75 Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired Fee Required |
| City & State | | City & State | | | 6. Election Campaign Financing \$5.00 May Be |
| | | | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | | 8. This corporation owes or has paid the current year Intangible |
| 24 279 | 154 25 USPT | | 30 (1 | Az | Tordonar Topon Tan dec dans do. 121 100 123 100 |
| ļ | 9. Name and Address of Current | Registered Agent | | 1 | 10. Name and Address of New Registered Agent |
|) WA | ALLER, ROLAND D | | 81 | Nam | ame |
| 5332 MAIN STREET | | | | Stree | reet Address (P.O. Box Number is Not Acceptable) |
| NE NE | W PORT RICHEY FL 34652 | | 82 |] | |
| | | | 83 | | The second secon |
| ļ | | | <u>-</u> - | <u> </u> | A |
| j | | | 84 | City | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607.0502 | and 607,1508, Florida Statutes | the abov | e-name | |
| 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. | | | | | |
| agencia | im ramiliar with, and accept the obliga- | tions of, Section 607.0505, Flori | iga Statute | s. | |
| SIGNATURE | Signature, typed or printed name of registered agen | and slate it and the Theorem | Danielana d An | | nature required when reinstaing) DATE |
| 12. | OFFICERS AND | | 13. | ent signal | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | - VD 4 F | DELETE | 1.1 TITLE | | Change Addition |
| NAME | TIERNEY, DEBRA | 21,000011 | 1.2 NAME | | |
| 1 | 32 PIRATES WAY | | | | |
| STREET AODRESS | MANTEO NC 27954 | | 1.3 STREET | | |
| CITY-ST-ZIP | | CALS DELETE | 1.4 CITY-5 | ST-ZIP | Change Addition |
| TITLE | PSTD ProsiSceitre | LI DETELE | 2.1 TITLE | | Cuange Ci Audinou |
| NAMÉ (| TIERNEY, MICHAEL | | 2.2 NAME | | |
| STREET ADORESS | 32 PIRATES WAY | | 2.3 STREE | ADDRES | RESS |
| CITY - ST - ZIP | MANTEO NC 27954 | | 2. 4 CITY - ST - ZIP | | |
| TITLE | | DELETE | 3.1 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET | ADDRES | RESS |
| CITY-ST-ZIP | | | 3.4, CITY- | ST-ZIP | |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET | T ADDRES | NESS |
| CITY-ST-ZIP | | | 4.4 CITY-5 | | |
| TOTLE | | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| | | | 5.3 STREET | . ADDDEC | neer l |
| STREET ADDRESS | | | | | 1 |
| CITY-ST-ZIP | | DELETE | 5.4 CITY - S 6.1 TITLE | i - ZIP | Change Addition |
| } | | - Dereie | | | T ovaide " T woontoo. |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET | | |
| City-St-ZiP | | | 6.4 CITY-5 | | |
| 14. I hereby c | sertify that the information supplied wit | h this filing does not qualify for | the exemp | tion sta | stated in Section 119,07(3)(i), Florida Statutes. I further certify that the information |

4. 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.

GNATURE:

Charles REQUIRED-98

919-473-2519