

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

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95 MAY -1 PM 2:48

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**600001490528
-05/17/95--01040--022
***200.00 ***200.00**

DO NOT WRITE IN THIS SPACE.

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra R. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V14355 (4)
1. Corporation Name
DOUGH FOR DOUGH, INC.

Principal Place of Business Mailing Address
**1941 S 14 ST
LEESBURG FL 34748** **1941 S 14 ST
LEESBURG FL 34748**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

3. Date Incorporated or Qualified 02/14/1992	3a. Date of Last Report 08/23/1994
4. FEI Number 59-3106820	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BRADLEY, STEVE
4240 NE 3 CT
OCALA FL 32870**

10. Name and Address of New Registered Agent

81 Name Steve Bradley
82 Street Address (P.O. Box Number is Not Acceptable) 605 Lewis St.
83
84 City Fruitland Park
85 Zip Code FL 34731

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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRADLEY, STEVE
STREET ADDRESS	4240 NE 3 CT
CITY - ST - ZIP	OCALA FL
TITLE	S
NAME	BRADLEY, ANITA C.
STREET ADDRESS	4240 NE 3 CT
CITY - ST - ZIP	OCALA FL
TITLE	V
NAME	CANTERBURY, CECIL
STREET ADDRESS	2875 NE 32ND PLACE
CITY - ST - ZIP	OCALA FL
TITLE	D
NAME	CANTERBURY, BETTY
STREET ADDRESS	2875 NE 32ND PLACE
CITY - ST - ZIP	OCALA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BRADLEY, STEVE
1.3 STREET ADDRESS	605 LEWIS ST.
1.4 CITY - ST - ZIP	FRUITLAND PARK, FL. 34731
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BRADLEY, ANITA
2.3 STREET ADDRESS	605 LEWIS ST.
2.4 CITY - ST - ZIP	FRUITLAND PARK, FL. 34731
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: Steve Bradley **Steve Bradley** Date: 9-24-787-2-20