

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

CORPORATION **5-1-95** **B-6016C** DEPARTMENT OF STATE
ANNUAL REPORT **1995**
Sandra E. Mathison
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

9 MAY -1 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **175010** (8)
1. Corporation Name
DANDY CORPORATION

Principal Place of Business Mailing Address
9 WEST 9TH STREET **9 WEST 9TH STREET**
P.O. BOX 1379 **P.O. BOX 1379**
TULSA OK 74101 **TULSA OK 74101**
US **US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/25/1953	3a. Date of Last Report 03/02/1994
4. FEI Number 59-1574353	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. 196.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 City Locality 24 City Locality	2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 City Locality 29 City Locality 30 City Locality
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9. Name and Address of Current Registered Agent
MOORE, TUCKER
16700 GULF BLVD
N. REDINGTON BCH FL 33708

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 607.1508, 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 _____
Registered Agent (Signature required after filing)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE V 2. NAME MOORE, C. T. 3. STREET ADDRESS 16700 GULF BLVD 4. CITY, ST, ZIP N. REDINGTON BCH FL	1.1 TITLE PST ☒ Change ☒ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP 33708 ☒ Change ☒ Addition
5. TITLE STD 6. NAME MOORE, MELISSA A. 7. STREET ADDRESS 16700 GULF BLVD 8. CITY, ST, ZIP N. REDINGTON BCH FL	2.1 TITLE V/D ☒ Change ☒ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP 85018 ☒ Change ☒ Addition
9. TITLE STD 10. NAME CARTWRIGHT, MARY K. 11. STREET ADDRESS 5309 E. PALOMINO RD 12. CITY, ST, ZIP PHOENIX AZ	3.1 TITLE V/D ☒ Change ☒ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP 33708 ☒ Change ☒ Addition
13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY, ST, ZIP	4.1 TITLE V ☐ Change ☒ Addition 4.2 NAME B. A. A. MOHR 4.3 STREET ADDRESS P.O. BOX 1724 4.4 CITY, ST, ZIP ST. PETERSBURG, FL 33731 ☐ Change ☐ Addition
17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY, ST, ZIP	5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP
21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY, ST, ZIP	6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and claims not equally for the corporation stated in Section 190.021(4)(b), Florida Statutes. I further certify that the information included 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 692, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes, or on an attachment with an address.

SIGNATURE: **C.T. Moore**
SIGNATURE AND TYPED OR PRINTED NAME OF BORING OFFICER OR DIRECTOR

4-27-95
Date Signature