

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 291542 (9)

1. Corporation Name

CLEO DEMOTT & ASSOCIATES, INC.

Principal Place of Business

3300 NE 36TH ST.
APT 1101
FT. LAUDERDALE FL
US

Mailing Address

3300 NE 36TH ST.
APT. 1101
FT. LAUDERDALE FL
US



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

Zip

Country

24

33308

25

29

33308

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/05/1965

3a. Date of Last Report

07/07/1995

4. FEI Number

59-1061269

Applied For

~~NOT APPLICABLE~~

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. 193.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

RYAN, JOHN D., CPA
4901 NW 17TH WAY #305
FT. LAUDERDALE FL 33309

81 Name

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

1919 N.E. 45TH ST. #218

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33308

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer 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

Signature of Registered Agent (must be signed and dated)

Signature of Registered Agent (must be signed and dated)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	DEMOTT, CLEO J	
STREET ADDRESS	3300 N.E. 36TH STREET	
CITY-STATE-ZIP	FT. LAUDERDALE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
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TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-STATE-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)(k), 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:

Cleo J. Demott Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 30, 1996 954-565-5808
DATE TELEPHONE

CR2E034 (12/95)