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FILED

Jan 22 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 296185 (2)

1. Corporation Name
DAKY, INC.

Principal Place of Business

* DALE E. CHLUMSKY
1199 THIRD ST., S.
NAPLES FL 33940

Mailing Address

* DALE E. CHLUMSKY
1199 THIRD ST., S.
NAPLES FL 34102-7056

3. Date Incorporated or Qualified

08/26/1965

3a. Date of Last Report

01/23/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 34102

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 34102

Country

4. FEI Number

59-1147222

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida StatutesYes ☐ No

9. Name and Address of Current Registered Agent

CHLUMSKY, DALE E
1199 THIRD STREET SOUTH
NAPLES FL 33940

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
34102

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CHLUMSKY, DALE E
STREET ADDRESS 1199 THIRD ST. SO.
CITY - ST - ZIP NAPLES FL ☐ DELETETITLE VSD
NAME CHLUMSKY, KATHERINE K
STREET ADDRESS 1199 THIRD ST. SO.
CITY - ST - ZIP NAPLES FL ☐ DELETETITLE TD
NAME CHLUMSKY, NICHOLAS D.
STREET ADDRESS 1199 THIRD STREET, SOUTH
CITY - ST - ZIP NAPLES FL ☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

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 ☐ Change ☐ Addition2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP ☐ Change ☐ Addition3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP ☐ Change ☐ Addition5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP ☐ Change ☐ Addition6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do 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.

SIGNATURE: Dale E. Chlumsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97

Date

(941) 262-4459

Daytime Phone #

CR2E034 (9/96)