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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 306359

(1)

1. Corporation Name

DEAN DEVELOPMENT CO., INC.



Principal Place of Business

4361 S.E. CHESAPEAKE BAY DR.
P.O. BOX 1830
STUART FL 34997

Mailing Address

4361 S.E. CHESAPEAKE BAY DR.
P.O. BOX 1830
STUART FL 34997

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

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9. Name and Address of Current Registered Agent

LITTMAN, CURTIS A
1855 S KANNER HWY #6
STUART FL 34994

81. Name

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

83.

84. City

FL

85. Zip Code

10. Name and Address of New Registered Agent

3. Date Incorporated or Qualified

06/20/1966

3a. Date of Last Report

02/27/1995

4. FEI Number

59-1151527

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. 199.032,
Florida Statutes

☐ Yes ☒ No

11. Pursuant to the provisions of Sections 607.0507 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 of person accepting appointment as registered agent)

(Signature of New Agent, if applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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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: Arthur G. Quinn, III VSTD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-96 (407) 287-5406

FL-100 (Rev. 9/95)

CR2E034 (12/95)