

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Feb 11 1997 8:00am  
Secretary of State

DOCUMENT # 335883 (5)  
1. Corporation Name  
DINO DISTRIBUTORS INC

Principal Place of Business

2456 BLANDING BLVD.  
PO BOX 587  
MIDDLEBURG FL 32068

Mailing Address

2456 BLANDING BLVD.  
PO BOX 587  
MIDDLEBURG FL 32068-5162



2. Principal Place of Business

21 Suite Apt. # etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

10/03/1968

3a. Date of Last Report

05/16/1996

4. FEI Number

59-1222971

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

9. Name and Address of Current Registered Agent

STOKES, E RICHARD  
3504 TRAIL RIDGE ROAD  
MIDDLEBURG, FLORIDA

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME STOKES SR., E. RICHARD  
STREET ADDRESS 3504 TRAIL RIDGE RD  
CITY-ST-ZIP MIDDLEBURG, FL 00000

DELETE

TITLE V  
NAME EVERETT R. JR.  
STREET ADDRESS 3505 HAVENWOOD RD  
CITY-ST-ZIP MIDDLEBURG FL

DELETE

TITLE T  
NAME STOKES, PATRICIA  
STREET ADDRESS 3504 TRAIL RIDGE RD.  
CITY-ST-ZIP MIDDLEBURG FL

DELETE

TITLE S  
NAME STOKES, LORI J.  
STREET ADDRESS 3505 HAVENWOOD RD.  
CITY-ST-ZIP MIDDLEBURG FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
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

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change 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 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:

E. Richard Stokes  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
E RICHARD STOKES

1/13/97 904-282-0889  
DATE Daytime Phone #

CR2E034 (9/96)