

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 398233

429548 4723 C

1. Corporation Name
DENIS A. DWYER AND COMPANY, INC.



Principal Place of Business: 1600 W. STATE RD. 7 FT. LAUDERDALE FL 33335
Mailing Address: POST OFFICE BOX 350337 FT. LAUDERDALE FL 33335

3. Date Incorporated or Qualified: 03/28/1972
3a. Date of Last Period: 07/21/1995

21	2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	59-1464060	Not Applicable
22	City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	Zip	Zip	<input type="checkbox"/>	
23	Country	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
			<input type="checkbox"/>	
24	25	29	30	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

DWYER, DENIS A
10951 S.W. 25 ST.
DAVIE FL 33324

10. Name and Address of New Registered Agent

B1	Name
B2	Street Address (P.O. Box Number is Not Acceptable)
B3	
B4	City
FL	B5 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DWYER, DENIS A	1.2 NAME	
STREET ADDRESS	10951 SW 25TH ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAVIE FL 33324	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMBERT, DONALD A	2.2 NAME	VICE-President
STREET ADDRESS	2288 EDWARD ROAD	2.3 STREET ADDRESS	DENISE A. POPICK
CITY-ST-ZIP	PALM BEACH GARDENS FL	2.4 CITY-ST-ZIP	10951 SW 25th St.
TITLE	ST	2.5 CITY-ST-ZIP	Davie, Fl. 33324
NAME	DWYER, GLORIA J	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	10951 SW 25TH ST.	3.2 NAME	
CITY-ST-ZIP	DAVIE FL 33324	3.3 STREET ADDRESS	
TITLE		3.4 CITY-ST-ZIP	
NAME		4.1 TITLE	VICE-PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		4.2 NAME	LAWRENCE T. DWYER
CITY-ST-ZIP		4.3 STREET ADDRESS	9884 Nob Hill Lane
TITLE		4.4 CITY-ST-ZIP	Sunrise, Fl. 33351
NAME		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
TITLE		5.4 CITY-ST-ZIP	
NAME		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
TITLE		6.4 CITY-ST-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 of this report. Attachment with an address.

SIGNATURE:

[Handwritten Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96 954-523-0304
Date Daytime Phone #

CR2E034 (12/95)