

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

DOCUMENT # **445998**

(8)

1. Corporation Name
DICK OLSON, INC.

Principal Place of Business
**32 TIFTON WAY SOUTH
PONTE VEDRA FL 32082**

Mailing Address
**32 TIFTON WAY SOUTH
PONTE VEDRA FL 32082-3320**

FILED
Mar 06 1997 8:00am
Secretary of State



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

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/07/1974

3a. Date of Last Report

04/10/1996

4. FEI Number

59-1516019

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

10. Name and Address of New Registered Agent

**OLSON, RICHARD C.
32 TIFTON WAY SOUTH
PONTE VEDRA FL 32082**

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 of registered agent and, if applicable, of corporation)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
**PD
OLSON, RICHARD C.
32 TIFTON WAY SOUTH
PONTE VEDRA FL**

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
**D
OLSON, BONITA
32 TIFTON WAY SOUTH
PONTE VEDRA FL**

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
**D
OLSON, MARK R.
8816 WOODLAND MEADOWS COURT
ANNANDALE VA**

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
**D
OLSON, ERIC M.
32 TIFTON WAY SO.
PONTE VEDRA BCH FL**

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
**D
OLIVER, KIM C
1533 HOPKINS CREEK LANE
NEPTUNE BEACH FL**

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
**D
OLSON, RICHARD CHARLE
12 RAINES AVENUE
SANDSTON VA**

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

2.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

2.5 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

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

(Signature and typed or printed name of signing officer or director)

23-FEB-97

904-2852340

CR2E034 (9/96)