

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 469553

Entity Name: DLIC, INC.

FILED  
Jan 17, 2005  
Secretary of State

**Current Principal Place of Business:**

8014 SW 135TH ST. RD.  
OCALA, FL 34473 US

**New Principal Place of Business:**

**Current Mailing Address:**

8014 SW 135TH ST. RD.  
SUITE 700  
OCALA, FL 34473 US

**New Mailing Address:**

8014 SW 135TH ST. RD.  
OCALA, FL 34473 US

FEI Number: 59-1637468

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FISHER, BETH  
8014 SW 135 STREET ROAD  
OCALA, FL 34473 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GRAM, ANTONY  
Address: 8014 SW 135TH ST. RD.  
City-St-Zip: Ocala, FL 34473

Title: TD ( ) Delete  
Name: MOORE, ROBERT  
Address: 8014 SW 135TH ST. RD.  
City-St-Zip: Ocala, FL 34473

Title: SD ( ) Delete  
Name: FISHER, BETH  
Address: 8014 SW 135TH ST. RD.  
City-St-Zip: Ocala, FL 34473

Title: V ( ) Delete  
Name: ARUNSKI, ROBERT W  
Address: 8014 SW 135 ST RD  
City-St-Zip: Ocala, FL 34473

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETH FISHER

SD

01/17/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date