

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **647456** (3)

1. Corporation Name

DESOTO SYSTEMS, INC.



Principal Place of Business

Mailing Address

**3411 A AVENIDA MADERA
BRADENTON FL 34210
US**

**P. O. BOX 11442
BRADENTON FL 34282
US**

3. Date Incorporated or Qualified 12/06/1979	3a. Date of Last Report 04/19/1995
4. FEI Number 59-1956822	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	

2. Principal Place of Business

2a. Mailing Address

21 **5137 Wed Ct. E.**

26

State, Apt. #, etc.

State, Apt. #, etc.

22 **Bradenton, FL**

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24 **34203**

25 **Manatee**

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KALB, DONNA
3411 A AVENIDA MADERA
BRADENTON FL 34210**

81 Name
Kalb, Donna J.
82 Street Address (P.O. Box Number is Not Acceptable)
5137 Wedge Ct. E.
83 **Bradenton, FL 34203**
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

DATE (For New Agent, date of incorporation, if any)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	KALB, DONNA J	
STREET ADDRESS	3411 A. AVENIDA MADERA	
CITY, ST, ZIP	BRADENTON FL	
TITLE	VST	☐ DELETE
NAME	KALB, EDWIN C	
STREET ADDRESS	3411 A. AVENIDA MADERA	
CITY, ST, ZIP	BRADENTON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

1. TITLE	☒ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	5137 Wedge Ct. E.
14 CITY, ST, ZIP	Bradenton, FL 34203
2. TITLE	☒ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	5137 Wedge Ct. E.
24 CITY, ST, ZIP	Bradenton, FL 34203
3. TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
4. TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
6. TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 (if changed), or on an attachment with an address.

SIGNATURE:

Donna J. Kalb
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96

Date

Chapter or Part #

CR2E034 (12/95)