

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 # 652041 (5)

1. Corporation Name

DIGITAL ELECTRONIC SYSTEMS, INC.



Principal Place of Business

Mailing Address

565 PAUL MORRIS DRIVE
ENGLEWOOD FL 34223
US

P.O. BOX 1073
ENGLEWOOD FL 34295-1073
US

3. Date Incorporated or Qualified

01/11/1980

3a. Date of Last Report

01/18/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1976630

Applied For

Not Applicable

22

27

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

Country

29

Zip

30

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FELLIN, JOHN J.
565 PAUL MORRIS DR
ENGLEWOOD FL 34223

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 607.1506, 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 (if this is applicable)

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRD ☐ DELETE

NAME
FELLIN, JOHN J.
STREET ADDRESS
832 DIANE CIRCLE
CITY-ST-ZIP
ENGLEWOOD FL

TITLE VSD ☐ DELETE

NAME
FELLIN, LINDA S
STREET ADDRESS
832 DIANE CIR.
CITY-ST-ZIP
ENGLEWOOD FL 34223

TITLE D ☐ DELETE

NAME
FELLIN, EUGENE A
STREET ADDRESS
940 LORD STREET
CITY-ST-ZIP
ENGLEWOOD FL 34223

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PTD ☒ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 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 registered 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:

John J. Fellin

John J. Fellin

01/25/96

(941) 474-9518

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)