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 # 653405 (1)

1. Corporation Name
DEBARY ASSOCIATES, INC.

Principal Place of Business
1 LEISURE DRIVE SOUTH
P.O. BOX 2080
DEBARY FL 32713

Mailing Address
1 LEISURE DRIVE SOUTH
P.O. BOX 2080
DEBARY FL 32713

3. Date Incorporated or Qualified: 01/25/1980
3a. Date of Last Report: 04/17/1995
4. FEI Number: 59-1987978 ☐ 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
21 ___
Suite, Apt. #, etc.
22 ___
City & State
23 ___
Zip 24 ___ Country 25 ___

2a. Mailing Address
26 ___
Suite, Apt. #, etc.
27 ___
City & State
28 ___
Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent

SHALETT, CHARLES
505 DELTONA BLVD.
DELTONA FL 32725

10. Name and Address of New Registered Agent

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 ___ DATE ___

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SHALETT, CHARLES 470 CARTER ROAD DELAND FL	☐ DELETE	☒ Change ☐ Addition 915 MARCY DRIVE DELAND, FL. 32724
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BLUMIN, SHIRLEY S 118 PALM DR DEBARY, FL 00000	☒ DELETE	☐ Change ☒ Addition V.P. CARYL SHALETT 915 MARCY DRIVE DELAND, FL. 32724
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GOELZ, HAROLD 470 CARTER ROAD DELAND, FL 00000	☐ DELETE	☒ Change ☐ Addition 505 DELTONA BLVD - STE 104 DELTONA, FL. 32725
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HICHBORN, WILLIAM 470 CARTER ROAD DELAND, FL 00000	☐ DELETE	☒ Change ☐ Addition 505 DELTONA BLVD. - STE 104 DELTONA, FL. 32725
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition 300001862303 -06/14/96--01043--030 ***200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	☐ Change ☐ Addition 6-12-96

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: [signature] 6/6/96 (407) 574-6601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CHARLES SHALETT - PRES

CR2E034 (12/95)