

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90022 042 ***150.00

DOCUMENT # 684131

1. Entity Name

DENNIS DISTRIBUTIONS, INC.



Principal Place of Business

265 RING POWER ROAD
PERRY FL 32348
US

Mailing Address

265 RING POWER ROAD
PERRY FL 32348
US

J4U10000



MOORE

CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

36-3081384

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DENNIS, BRINDA
265 RING POWER ROAD
PERRY FL 32348

Name

BRINDA DENNIS

Street Address (P.O. Box Number is Not Acceptable)

2385 ANDREW MORGAN DR

PERRY, FL 32347

City

PERRY

FL

Zip Code

32347

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Brinda Dennis (BRINDA DENNIS)

2.11.04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME KELLER, PATRICIA S
STREET ADDRESS 257 RING POWER RD
CITY-ST-ZIP PERRY FL 32348

TITLE VS ☐ Delete
NAME KELLER, PATRICIA S
STREET ADDRESS 257 RING POWER RD
CITY-ST-ZIP PERRY FL 32348

TITLE PT ☐ Delete
NAME DENNIS, TIMOTHY A
STREET ADDRESS 257 RING POWER RD
CITY-ST-ZIP PERRY FL 32348

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PT ☒ Change ☐ Addition
NAME DENNIS, TIMOTHY A
STREET ADDRESS 2385 ANDREW MORGAN DR,
CITY-ST-ZIP PERRY FL 32347

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Tim Dennis TIM DENNIS

2.11.04

850.223.3213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #