


03-16-2005 90034 048 ***150.00
684131

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

05 MAR 29 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
50027103

DOCUMENT # 684131 1. Entity Name DENNIS DISTRIBUTIONS, INC.	
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Principal Place of Business
265 RING POWER ROAD
PERRY, FL 32348 US

Mailing Address
265 RING POWER ROAD
PERRY, FL 32348 US



01112005 No Chg-P CR2E034 (10/03)

4. FEI Number 36-3081384	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DENNIS, BRINDA
2385 ANDREW MORGAN DR.
PERRY, FL 32347

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KELLER, PATRICIA S 257 RING POWER RD PERRY, FL 32348
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS KELLER, PATRICIA S 257 RING POWER RD PERRY, FL 32348
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT DENNIS, TIMOTHY A 2385 ANDREW MORGAN DR. PERRY, FL 32347
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Timothy A. Dennis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-05
Date

Daytime Phone #

3/29/05