FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 27 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F51928 (2)

1. Corporation Name
DANTZLER LUMBER & EXPORT COMPANY

Principal Place of Business	Mailing Address
8000 GOVERNORS SQUARE BLVD SUITE 410 MIAMI LAKES FL 33016	8000 GOVERNORS SQUARE BLVD SUITE 410 MIAMI LAKES FL 33016

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/30/1981
3a. Date of Last Report: 02/03/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

4. FEI Number: 59-0213620 ☐ 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

9. Name and Address of Current Registered Agent

FOTOPULOS, THOMAS E.
315 EAST MADISON STREET
TENTH FLOOR, SUN BANK BLDG.
TAMPA FL 33602

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	GODINEZ, ANTONIO D.	1.2 NAME	
STREET ADDRESS	121 CAPE FLORIDA DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAYNE FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	☐ Change ☐ Addition
NAME	GODINEZ, BONNIE	2.2 NAME	
STREET ADDRESS	121 CAPE FLORIDA DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAYNE FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	SECRETARY ☒ Change ☐ Addition
NAME	PARKE, EUGENE F.	3.2 NAME	POTTER, VAUGHN L.
STREET ADDRESS	4161 N.W. 2ND STREET	3.3 STREET ADDRESS	9360 FOUNTAINBLEAU BLVD. 105
CITY-ST-ZIP	DELRAY BEACH FL	3.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE	T	4.1 TITLE	Treasurer + Asst. Secy ☐ Change ☒ Addition
NAME	COLEY, DENISE	4.2 NAME	Denise B. Coley
STREET ADDRESS	3600 HIGH PINE DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	☐ Change ☐ Addition
NAME	NOBLE, MIKE	5.2 NAME	
STREET ADDRESS	BOISE WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	COOPER CITY FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(i), 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: Denise B Coley, TREASURER 4-21-95 1-305-828-9666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CP