

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **F57788** (4)

1. Corporation Name
DILLON-REYNOLDS AERIAL PHOTOGRAPHY, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAR 10 AM 8:31

Principal Place of Business Mailing Address
2600 W. OAKLAND PARK BLVD. 2600 W. OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
12/03/1981 **05/24/1994**

| | | | |
|--------------------------------|----------------------------------|--------------------------|----------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | |
| 21 | 2450 W. OAKLAND PARK BLVD | 26 | 2450 W. OAKLAND PARK BLVD |
| 22. City & State | | 27. City & State | |
| OAKLAND PARK, FLA. | | OAKLAND PARK FLA. | |
| 24 | Zip 33311 | 29 | Zip 33311 |
| 25 | Country USA | 30 | Country USA |

4. FEI Number Applied For
59-2146888 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

RICHARD P. REYNOLDS
2600 W. OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name **RICHARD P. REYNOLDS (SAME)**

82 Street Address (P.O. Box Number is Not Acceptable)
2450 W. OAKLAND PARK BLVD

83 **FT. LAUDERDALE**

84 City **OAKLAND PARK** FL 85 Zip Code **33311**

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 *Richard P. Reynolds* DATE **3/7/95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|----------------|--------------------------------|
| TITLE | DST |
| NAME | REYNOLDS, FRANCES C |
| STREET ADDRESS | 1370 S OCEAN BLVD 1401 |
| CITY-ST-ZIP | POMPANO BCH FL |
| TITLE | P |
| NAME | REYNOLDS, RICHARD |
| STREET ADDRESS | 1370 S JOCEAN BLVD 1401 |
| CITY-ST-ZIP | POMPANO BCH FL |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| | |
|--------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-ST-ZIP | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 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)(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 prepare 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: *Richard P. Reynolds, Pres.* DATE **3/7/95** **305-733-0840**