## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # F57960**

DEAN WARD ENTERPRISES, INC.

Principal Place of Business Mailing Address								-,		
% DAVID D WARD  SOUTHWEST OF LAKE BUTLER OFF HWY 121  LAKE BUTLER FL 32054  SOUTHWEST OF LAKE BUTLER FL 32054  LAKE BUTLER FL 32054			SUTLER OF	ER OFF HWY 121			DO NOT WRITE IN THIS	SPACE		
LANC BUILER PL 32004 CARE DUTCER TE 32004							3. Date Incorporated or Qualifed			
							12/10/1981			
2 Principal P	lace of Business	2a. Mailing Address			-		4. FEI Number		Applied For	
a. Thropart	ido di Badinisa	26					59-2150299		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional				
22		27				5. Certificate of Status Desired Fee Required ·				
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution		d to Fees		
Zip				Country			8. This corporation owes the current year Inter-			
24	25	29	30				Personal Property Tax.	Yes	□Nọ	
Name and Address of Current Registered Agent					Name		10. Name and Address of New Registered Agent		<del>-</del> -	
WARD, DAVID D SOUTHWEST OF LAKE BUTLER OFF HWY 121				81	Name					
				82	Street	Addres	ss (P.O. Box Number is Not Acceptable)			
	E BUTLER FL 32054			83			3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 1 80 80	સામાં કર્યા છે. સામાર્થિક હતા હતા	
Can	E BOTELITTE GEGGA			03			。	#1111	14条 [新建]	
		•		84	City		FI	85 Zi	p Code 1 1111	
eg guner til til kalle		00 1007 4500 Florido Ct-			nomod	00000	ration submits this statement for the purpose of	changing	its registered	
Affina or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was	authorized	יעם נ	tne corbo	oration	S goald of directors. Thereby accept the appoin	ntment as	registered	
SIGNATURE	Signature, typed or printed name of registered age			Agen	t signature r	required v	when reinstating) DATE	D DIDEC	TODE IN 12	
12.		ND DIRECTORS	13.			т—	ADDITIONS/CHANGES TO OFFICERS AN	Chang		
TITLE	b bridge	☐ DELETE	1.1 Tî							
NAME	WARD, DAVID D		1.2 N				•		ì	
STREET ADDRESS		•		_	ADDRESS		i			
CITY-ST-ZIP	LAKE BUTLER FL	☐ DELETE		TY-\$1	r-zip	-		Chang	ie Maddition	
TITLE	ST MECHAN	☐: DELETE	2.1 TI				1 7		,	
NAME	WARD, VIRGINIA	•	2.2 N				1			
STREET ADDRESS	OFF HWY 121 SW OF LK BTL	•	2.3 STREET ADDRESS  2.4 CITY-ST-ZIP		1			,		
CITY-ST-ZIP	LAKE BUTLER FL	☐ DELETE	2. 4 C		T-ZIP	┼─	-	Chang	e Addition	
TITLE		☐ DETEIE						L	,	
NAME	224		3.2 N	•					}	
STREET ADDRESS	[ · · ·		- 1		ADDRESS	Ί.				
CITY-ST-ZIP		DELETE	3.4. C	TIF	1-ZIP	1		Chan	e Addition	
TITLE		· C. Drivese		IAME			****	<del>-</del> · · · ·		
NAME					ADDRESS					
STREET ADDRESS				TY-S		Ί	•		j	
CITY-ST-ZIP TITLE		□ DELETE	4.4 C		1-ZIF	+-		Chang	ge Addition	
			5.2 N							
NAME					ADDRESS					
STREET ADDRESS	if		1			1	4.4		I	

14. 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 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 of 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

NAME

**FILED** 

Feb 10, 1999 8:00am

**Secretary of State** 

02-10-1999 90072 001 \*\*\*150.00

Change