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 10 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93420** **(0)**

1. Corporation Name

D.M. ECKERT ENTERPRISES (FLORIDA), INC.

Principal Place of Business	Mailing Address
5130 BRITTANY DRIVE SO. ST. PETERSBURG FL 33715	5130 BRITTANY DRIVE SO. ST. PETERSBURG FL 33715

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/05/1982
3a. Date of Last Report: 03/02/1994

21 2. Principal Place of Business	5130 Brittany Drive So #904
22 Suite, Apt. #, etc.	
23 City & State	
24 Zip / 25 Country	
26 2a. Mailing Address	P.O. Box 15038
27 Suite, Apt. #, etc.	
28 City & State	St. Petersburg, FL
29 Zip / 30 Country	33733 / USA

4. FEI Number: 34-6544917 ☐ 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

ECKERT, DENVER M
5130 BRITTANY DRIVE SOUTH
ST PETERSBURG FL 33715

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable): 5130 Brittany Drive So #904

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	PS	1.1 TITLE	PSD	☒ Change ☐ Addition
NAME	ECKERT, DENVER M.	1.2 NAME		
STREET ADDRESS	5130 BRITTANY DRIVE	1.3 STREET ADDRESS	5130 Brittany Drive So. #904	
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	St. Petersburg, FL 33715	
TITLE	D	2.1 TITLE	Delete	☒ Change ☐ Addition
NAME	ECKERT, DENVER M.	2.2 NAME	Delete	
STREET ADDRESS	5130 BRITTANY DRIVE	2.3 STREET ADDRESS	Delete	
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	Delete	
TITLE	VTD	3.1 TITLE		☒ Change ☐ Addition
NAME	ECKERT, ALAN D.	3.2 NAME		
STREET ADDRESS	5130 BRITTANY DR.	3.3 STREET ADDRESS	5130 Brittany Drive So. #904	
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	St. Petersburg, FL 33715	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		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: X D M Eckert 4-5-95 813-864-3608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Denver M. Eckert

0448030 FP