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PROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93420**

(0)

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

Principal Place of Business Mailing Address 5130 BRITTANY DRIVE SO #904 P.O. BOX 15038 ST. PETERSBURG FL 33733-5038 ST. PETERSBURG FL 33715 US US 3. Date Incorporated or Qualified 3a. Date of Last Report 08/05/1982 04/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 34-6544917 Not Applicable Suite, Apt. #, etc. Suite Apt #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Žin Country Country 2ip8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ECKERT, DENVER M 5130 BRITTANY DRIVE SO. #904 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33715 83 84 City 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 Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent it am farm-liar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proded name of registered area and offeld applicable (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. PSD DELETE Change ■ Addition TITLE 1.1 TITLE ECKERT. DENVER M. NAME 1.2 NAME 5130 BRITTANY DRIVE SO #904 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 1.4 CITY - ST- ZIP CITY - ST - 7IP VTD: DÉLETÉ Change Addition 2.1.TITLE TITLE ECKERT, ALAN D. NAME 22 NAME 5130 BRITTANY DRIVE SO #904 2.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 2 4 CITY - ST - ZIP CITY - ST - 7IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME **3.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 3 4. CITY - ST - ZIP DELETE 4 1 TITLE ☐ Change Addition TITLE NAME 4, 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition DILE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 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 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armual 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

hanged, or on an attachmens with an address