

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F95000004778 (5)

1. Corporation Name

DANCO EXPLORATION, INC.



Principal Place of Business

384 NORTH BEACH ST.  
DAYTONA BEACH FL 32114

Mailing Address

384 NORTH BEACH ST.  
DAYTONA BEACH FL 32114

3. Date Incorporated or Qualified

10/03/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

DONKEL, DANIEL K  
1420 N. ATLANTIC AVE. #1804  
DAYTONA BEACH FL 32118

4. FEI Number

NOT APPLICABLE

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

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

Signature typed or printed name of registered agent and the corporation

NOTE: Registered Agent Signature Required when new agent

DATE

12. OFFICERS AND DIRECTORS

TITLE CP ☐ DELETE  
NAME DONKEL, DANIEL K  
STREET ADDRESS 1420 N. ATLANTIC AVE., APT. 1804  
CITY-STATE-ZIP DAYTONA BEACH FL 32118

TITLE D ☐ DELETE  
NAME BOLT, ROBERT O  
STREET ADDRESS 56 CULLODEN PARK RD.  
CITY-STATE-ZIP SANRAFAEL CA 94401

TITLE D ☐ DELETE  
NAME CROMWELL, M. JENKINS  
STREET ADDRESS 14910 TANYARD ROAD  
CITY-STATE-ZIP SPARKS MD 21152

TITLE D ☐ DELETE  
NAME HOODARD, ROBERT  
STREET ADDRESS 3333 E. FLORIDA ST. #6  
CITY-STATE-ZIP DENVER CO 80210

TITLE D ☐ DELETE  
NAME BROOKS, CHARLES  
STREET ADDRESS 221 TURNER DR.  
CITY-STATE-ZIP HOUSTON TX 77076

TITLE D ☐ DELETE  
NAME DYSON, RONALD  
STREET ADDRESS 363 HIND ROW LAKE DR.  
CITY-STATE-ZIP GOODARD KS 67052

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 12 EAST EAGER ST  
3.4 CITY-STATE-ZIP BALTIMORE, MD 21202

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME WOODARD, ROBERT  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96

304/239 7000

Date

Payable Price #

CR2E034 (12/95)