

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

FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G25518** (3)
1. Corporation Name
D.C.D. INDUSTRIES, INC.



Principal Place of Business 1325 WEST BEAVER ST JACKSONVILLE FL 32209 US	Mailing Address P. O. BOX 40706 N/A JACKSONVILLE FL 32203-0706 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/25/1983	3a. Date of Last Report 04/29/1996
21 Suite, Apt. #, etc.	26	27	28	4. FEI Number 59-2263521	Applied For Not Applicable
22 City & State	27	28	29	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23 Zip	24	25	26	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
27 Country	28	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**DAWKINS, D C JR
1325 W. BEAVER ST.
P. O. BOX 40706 N/A
JACKSONVILLE FL 32203**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 for applicant

(NOTE: Registered Agent's signature required when reappointing)

(DATE)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DPT	☐ DELETE		1.1 TITLE		☐ Change ☐ Addition	
NAME	DAWKINS, DEWITT C JR			1.2 NAME			
STREET ADDRESS	4502 IRVINGTON AVE			1.3 STREET ADDRESS	1325 WEST BEAVER ST		
CITY-ST-ZIP	JACKSONVILLE, FL 00000			1.4 CITY-ST-ZIP	JACKSONVILLE, FL 32209		
TITLE	VPSD	☒ DELETE		2.1 TITLE	S.D.	☒ Change ☐ Addition	
NAME	JOHNSTON ANN			2.2 NAME	DAWN E. HUTSON		
STREET ADDRESS	4502 IRVINGTON AVE			2.3 STREET ADDRESS	1325 WEST BEAVER ST		
CITY-ST-ZIP	JACKSONVILLE FL			2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32209	☐ Change ☐ Addition	
TITLE	VPO	☐ DELETE		3.1 TITLE			
NAME	DAWKINS D CLINTON III			3.2 NAME			
STREET ADDRESS	4502 IRVINGTON AVE			3.3 STREET ADDRESS	1325 WEST BEAVER ST		
CITY-ST-ZIP	JACKSONVILLE FL			3.4 CITY-ST-ZIP	JACKSONVILLE, FL 32209	☐ Change ☐ Addition	
TITLE		☐ DELETE		4.1 TITLE		☐ Change ☐ Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE		☐ Change ☐ Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		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 does not qualify for the exemption stated in Section 119.07(3)(c), 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]*

4/21/97 904-355-3104

CR2E034 (9/96)