

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # G37981 (9)

1. Corporation Name

DENVER CORPORATION



Principal Place of Business

Mailing Address

**4400 MARSH LANDING BLVD.
P.O. BOX 1219 (32004)
PONTE VEDRA BCH FL 32082**

**4400 MARSH LANDING BLVD.
P.O. BOX 1219 (32004)
PONTE VEDRA BCH FL 32082**

3. Date Incorporated or Qualified

05/11/1983

3a. Date of Last Report

07/12/1995

4. FEI Number

59-2366240

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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

**MELCHING, STEPHEN D.
4400 MARSH LANDING BLVD.
P.O. BOX 1219 (PONTE VEDRA BEACH, FL.)
PONTE VEDRA BCH FL 32082**

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 of Registered Agent (Required) Agent and the name of the

the State Registered Agent (Signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP
FLETCHER, JEROME S.**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY- ST- ZIP **PONTE VEDRA BCH FL**

TITLE ☐ DELETE

NAME **VD
FLETCHER, PAUL Z.**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY- ST- ZIP **PONTE VEDRA BCH FL**

TITLE ☐ DELETE

NAME **VDT
MELCHING, STEPHEN D.**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY- ST- ZIP **PONTE VEDRA BCH FL**

TITLE ☐ DELETE

NAME **S
HUTCHINSON, FRANCES F.**
STREET ADDRESS **4400 MARSH LANDING BLVD.**
CITY- ST- ZIP **PONTE VEDRA BCH FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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)(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 addition with an address.

SIGNATURE:

Frances F. Hutchinson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Frances F. Hutchinson

2/16/96

(904) 285-6921

Date

Daytime Phone #

CR2E034 (12/95)