

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 # **G62628**

(4)

1. Corporation Name

DAVIE LEDBETTER, INC.



Principal Place of Business

% DAVIE F. LEDBETTER
2400 EAST OAKLAND PARK BOULEVARD
FT. LAUDERDALE FL 33306

Mailing Address

% DAVIE F. LEDBETTER
2400 EAST OAKLAND PARK BOULEVARD
FT. LAUDERDALE FL 33306

2. Principal Place of Business

2a. Mailing Address

21
22
23
24

Suite, Apt. #, etc.

City & State

Zip

Country

25

Suite, Apt. #, etc.

City & State

Zip

Country

26
27
28
29

30

9. Name and Address of Current Registered Agent

**LEDBETTER, DAVIE F.
2400 EAST OAKLAND PARK BOULEVARD
FT. LAUDERDALE FL 33308**

3. Date Incorporated or Qualified

09/16/1983

3a. Date of Last Report

05/01/1995

4. FET Number

59-2327141

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 607.1503, 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

Registering typed or printed name of registered agent and filer if applicable

801B Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

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2. NAME

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1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

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)(g), 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

David F. Ledbetter

4/5/96

954 566 0200

CR2E034 (12/95)