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Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G83837

(6)

1. Corporation Name

THE DANTZLER CORPORATION

Principal Place of Business

62 4TH ST NW
P.O. BOX 182
WINTER HAVEN FL 33881
US

Mailing Address

PO BOX 901
WINTER HAVEN FL 33882-0901
US

3. Date Incorporated or Qualified
02/08/1984

3a. Date of Last Report
03/06/1996

2. Principal Place of Business

21 43 5TH ST NW

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 WINTER HAVEN, FL

City & State

27

Zip

24 33881

Country

25 USA

Zip

29

Country

30

4. FEI Number

59-2372289

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

9. Name and Address of Current Registered Agent

DANTZLER, R. TODD
62 4TH STREET NW
WINTER HAVEN FL 33881

10. Name and Address of New Registered Agent

81 Name DANTZLER, R. TODD

82 Street Address (P.O. Box Number is Not Acceptable)

83 43 5TH ST. NW

84 City WINTER HAVEN

FL

85 Zip Code 33881

11. Pursuant to the provisions of Sections 607.0505 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-15-97

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME DANTZLER, R. TODD
STREET ADDRESS 62 4TH ST NW
CITY - ST - ZIP WINTER HAVEN FL

TITLE D ☐ DELETE

NAME DANTZLER, BRADLEY T.
STREET ADDRESS 62 4TH ST NW
CITY - ST - ZIP WINTER HAVEN FL

TITLE D ☐ DELETE

NAME DANTZLER, RICHARD E.
STREET ADDRESS 600 W LK OTIS DRIVE SE
CITY - ST - ZIP WINTER HAVEN FL

TITLE D ☐ DELETE

NAME DANTZLER, RICHARD
STREET ADDRESS 880 W LK OTIS DRIVE
CITY - ST - ZIP WINTER HAVEN 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 PD DANTZLER, R. TODD
1.3 STREET ADDRESS 43 5TH ST. NW
1.4 CITY - ST - ZIP WINTER HAVEN, FL.

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME PD DANTZLER, BRADLEY T.
2.3 STREET ADDRESS 43 5TH ST. NW
2.4 CITY - ST - ZIP WINTER HAVEN, FL.

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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

Date

Daytime Phone #

1-15-97

941 297-5593

0398228

CR2E034 (9/96)