

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 # **G89546**

(7)

1. Corporation Name

DIRIGO ENTERPRISES, INC.



Principal Place of Business

**4150 ACTIVITY LANE
ZEPHYRHILLS FL 33541**

Mailing Address

**4150 ACTIVITY LANE
ZEPHYRHILLS FL 33541**

3. Date Incorporated or Qualified
03/09/1984

3a. Date of Last Report
02/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2384869

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

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCALVANA, THOMAS P.
37818 HWY 54 W.
ZEPHYRHILLS FL 33541**

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 President or other officer or director of corporation

Signature of Registered Agent (Signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PDT
MCGILLAN, FREDERICK
RFD #2, BOX 81
FT FAIRFIELD ME
DSV
FRIEND, RONALD H
MAIN STREET
PITTSFIELD ME**

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

1. TITLE
12. NAME
13. STREET ADDRESS
14. CITY-ST-ZIP
2. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP
3. TITLE
32. NAME
33. STREET ADDRESS
34. CITY-ST-ZIP
4. TITLE
42. NAME
43. STREET ADDRESS
44. CITY-ST-ZIP
5. TITLE
52. NAME
53. STREET ADDRESS
54. CITY-ST-ZIP
6. TITLE
62. NAME
63. STREET ADDRESS
64. CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Frederick McGillan Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FREDERICK MCGILLAN PRESIDENT

1-30-96

813 782-5055

DATE

DATE OF FILING

CR2E034 (12/95)