

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G96555** (9)

1. Corporation Name

DONKAR ENTERPRISES, INCORPORATED



Principal Place of Business

**5202 COTO PLACE
VALRICO FL 33594
US**

Mailing Address

**5202 COTO PLACE
VALRICO FL 33594
US**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MARSH, DONALD C.
5202 COTO PLACE
VALRICO FL 33594**

3. Date Incorporated or Qualified

04/17/1984

3a. Date of Last Report

05/25/1995

4. FEI Number

59-2403887

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 607.1508, 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 or Officer or Director

Signature of New Registered Agent or Officer or Director

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	PD	☐ DELETE
2. NAME	MARSH, DONALD C.	
3. STREET ADDRESS	4704 FAIRLEA DRIVE	
4. CITY, STATE, ZIP	VALRICO FL	
5. TITLE	STD	☐ DELETE
6. NAME	MARSH, KAREN J.	
7. STREET ADDRESS	4704 FAIRLEA DRIVE	
8. CITY, STATE, ZIP	VALRICO FL	
9. TITLE		☐ DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, STATE, ZIP		
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, STATE, ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, STATE, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Vice President	☐ Change ☒ Addition
2. NAME	K. Todd Marsh	
3. STREET ADDRESS	1722 Powder Ridge Dr.	
4. CITY, STATE, ZIP	Valrico, FL 33594	☐ Change ☐ Addition
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, STATE, ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, STATE, ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, STATE, ZIP		

14. I, the undersigned, 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 of changes, or on a attachment with an address.

SIGNATURE: *Karen J. Marsh*, Sec./Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(813) 626-3141

DATE: _____ DAY: _____

CR2E034 (12/95)