

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H30806

(4)

1. Corporation Name

DEAN'S THREE, INC.



Principal Place of Business 901 COUNTRY CLUB BOULEVARD CAPE CORAL FL 33990	Mailing Address 901 COUNTRY CLUB BOULEVARD CAPE CORAL FL 33990-3023
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/20/1984	3a. Date of Last Report 03/06/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.			4. FEI Number 59-2486239	Applied For Not Applicable
22 City & State	27 City & State			5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23 Zip	28 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

DEAN, THOMAS C.
901 COUNTRY CLUB BLVD.
CAPE CORAL FL 33990

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0532 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 THOMAS C. DEAN, PRESIDENT

Thomas C. Dean, Pres.

2/15/97

Signature, typed or printed name of registered agent and location applicable

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	DEAN, DAVID C.	☒ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME				1.2 NAME			
STREET ADDRESS				1.3 STREET ADDRESS			
CITY-ST-ZIP				1.4 CITY-ST-ZIP			
TITLE	PTD	DEAN, THOMAS C.	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE	SD	DEAN, CURTIS D.	☐ DELETE	3.1 TITLE	VICE PRESIDENT	☐ Change	☒ Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE			☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE			☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE			☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 THOMAS C. DEAN, PRESIDENT 2/15/97

CR2E034 (9/96)