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STREET ADDRESS



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State DIVISION OF CORPORATIONS (0)D.R.N. INDUSTRIES, INC. Mailing Address Principal Place of Business 8616 HAMPSHIRE DR. 392 HAIRPIN DR. SEBRING FL 33870 **BUILDING 901** SEBRING FL 33870 3a. Date of Last Hegol. 06/13/1995 Date Incorporated or Qualified 03/17/1986 Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite Apt. #, etc. Fee Required 27 22 **\$5.00** May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 Country Country  $Z_{10}$ Ζφ 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name NICHOLS, DALLAS R., JR. Street Address (P.O. Box Number is Not Acceptable) 82 8616 HAMPSHIRE DR. 83 SEBRING FL 33870 85 Zip Code 84 City 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. DATE SIGNATURE NOTE: Registered Agent signature Signature, typed or protect have blinegationed a pull and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Addition Change DELETE 1.1 TITLE TITLE NICHOLS, DALLAS R., JR. 1.2 NAMi NAME 8616 HAMPSHIRE DR. 1.3 STREET ADDRESS STREET ADDRESS SEBRING FL 1.4 CITY - ST - ZIP CITY-ST-ZiP ☐ Change ☐ Addition DEL FTE 2 1 TiTLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CiTY - ST - ZIP CHY-ST-ZIP Addition Change DELETE 3 1 TITUE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 City - St - ZiP CITY-ST-ZIP Change Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TUTLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME

6 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)(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.

6.3 STREET ADDRESS

Chals of Dallas R. Nichols, Jr. 41896 941-655-0347

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