SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # (0) DAVE'S BOBCAT SERVICE, INC. Mailing Address Principal Place of Business 12226 N.W. 30TH ST. 12226 N.W. 30TH ST. **CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065** 3a. Date of Last Report 3. Date Incorporated or Qualified 04/11/1995 08/28/1986 Applied For 4. FEI Number Mail-no Address 2. Principal Place of Business 59-2709677 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 **\$5.00** May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 This corporation has hability for intangible tax under s. 199 032, Country Zφ Zio Yes 🖊 No Florida Statutes 29 30 25 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LODGE, DAVID A. 82 Street Address (P.O. Box Number is Not Acceptable) 12226 N.W. 30TH STREET **CORAL SPRINGS FL 33065** 83 Zip Code 84 City 85 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. Thereby ancept the appointment as registered agent 1 am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when renstating) DAIL Signal ire, typed or professionance of registered agent and tife it approaches (3/96)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12 Change Addition DELETE 1.1 TITLE PD CR2E034 1.2 NAME LODGE, DAVID A. NAME 12226 N.W. 30TH STREET 1.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 1.4 CITY - ST - ZIP City-St-Zif Change Addition DELETE 21 TITLE TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.3 STREET ADDRESS STREET ADDRESS 34 CHTY-ST-ZIP CITY-ST-ZIE Change Addition DELETE 4.1 TITLE TITLE 4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTY - \$1 - 7iP CITY - ST - ZIP Change Addition DELETE 5.1 THILE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 61 TilLE TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY - ST - ZIP

e co

NAME

STREET ADDRESS

NAME OF SIGNING OFFICER OR DIRECTOR

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.