

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J35673

(9)

1. Corporation Name

D.A.T. SALES & CONSULTING, INC.

Principal Place of Business

402 43RD ST. WEST  
BRADENTON FL 34209

Mailing Address

402 43RD ST. WEST  
BRADENTON FL 34209-2852

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

1016 W 9th Ave  
King of Prussia PA  
19406 USA

3. Date Incorporated or Qualified  
09/26/1986

3a. Date of Last Report  
04/19/1996

4. FEI Number

59-2726758

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

9. Name and Address of Current Registered Agent

GREENE, ROBERT P  
1901 6TH AVENUE WEST  
BRADENTON FL 34205

CT Corporation System  
1200 S Pine Island Rd  
Plantation FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 City

84 State

700002216557-8

-06/18/97-01114-026

\*\*\*\*165.00 \*\*\*\*165.00  
FL

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 607.0502, Florida Statutes.

SIGNATURE Connie Bryan

CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY

6-16-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC ☒ DELETE

NAME BOYD, WILBUR H  
STREET ADDRESS 402 43RD ST W  
CITY-ST-ZIP BRADENTON FL

TITLE DVPT ☒ DELETE

NAME ROSS, BRENDA SMYTH  
STREET ADDRESS 402 43RD ST W  
CITY-ST-ZIP BRADENTON FL

TITLE D ☒ DELETE

NAME LYNN, WAYNE R  
STREET ADDRESS 402-43RD STREET, WEST  
CITY-ST-ZIP BRADENTON FL

TITLE D ☒ DELETE

NAME BOYD, VALERIE  
STREET ADDRESS 402-43RD STREET, WEST  
CITY-ST-ZIP BRADENTON FL

TITLE DP ☐ DELETE

NAME BOYD, JAMES E  
STREET ADDRESS 402 43RD ST W  
CITY-ST-ZIP BRADENTON FL

TITLE DVP ☒ DELETE

NAME BAKER, DIANNA B  
STREET ADDRESS 402 43RD ST W  
CITY-ST-ZIP BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☒ Addition

1.2 NAME Loren Hulber

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Vice President ☐ Change ☒ Addition

2.2 NAME Brad Behr

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Secretary ☐ Change ☒ Addition

3.2 NAME marie martino

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Treasurer ☐ Change ☒ Addition

4.2 NAME Robert Moore

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE All located @ ☐ Change ☒ Addition

5.2 NAME 1016 W 9th Ave

5.3 STREET ADDRESS King of Prussia

5.4 CITY-ST-ZIP PA 19406

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 in any amendment with an address.

CR2E034 (9/96)