

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **J45440 (1)**
1. Corporation Name
DENTON PROPERTY, INC.



Principal Place of Business: ~~175 E. WEBSTER AVENUE WINTER PARK FL 32789-0224~~
Mailing Address: ~~175 E. WEBSTER AVENUE WINTER PARK FL 32789-0224~~

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 3454 ALOMA AV.		26 3454 ALOMA AV.		12/05/1986		03/20/1995	
22 WINTER PARK, FL		27 WINTER PARK, FL		4. FEI Number		Applied For	
23 32792		28 32792		59-2745170		Not Applicable	
24 32792		29 32792		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
25 FL		30 FL		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
26 FL		31 FL		Trust Fund Contribution		<input type="checkbox"/>	
27 FL		32 FL		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
28 FL		33 FL		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DENTON, JACQUELINE J. 175 E. WEBSTER AVE WINTER PARK FL 32789 1822 ESPANOLA AV. ORLANDO, FL. 32804				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DENTON, JACQUELINE J.			1.2 NAME			
STREET ADDRESS	175 E. WEBSTER AVE WINTER PARK FL 1822 ESPANOLA AV. ORLANDO, FL 32804			1.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL ORLANDO, FL 32804			1.4 CITY-ST-ZIP			
TITLE	STD	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DENTON, J. ROBERT			2.2 NAME			
STREET ADDRESS	175 E. WEBSTER AVE WINTER PARK FL 1822 ESPANOLA AV. ORLANDO, FL. 32804			2.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL ORLANDO, FL. 32804			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME	800001811218		
STREET ADDRESS				4.3 STREET ADDRESS	-05/07/96--01091--004		
CITY-ST-ZIP				4.4 CITY-ST-ZIP	***200.00		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: *Jacqueline J. Denton* **3-4-96** **407-677-0907**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)