## 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

DOCUMENT # **J45888** 

(1)

1. Corporation		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83   84   City   FL   85   Zip Code 8502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Section 607.0505, Florida Statutes.    Applicable						
glen a	DEMICK, INC.				 			
Principal Place	of Business	Mailing Address			**	OU SIDII OIDII BI		IBAN DABIH IDBI
403 PHILADELPHIA DRIVE 403 PHILADELPHIA DRIVE					Date Incorporated or Qualified	3a. Date o	f Last Re	eport
					12/08/1986	03/1	4/199	5
2. Principal Pla	ce of Business	<u>⊢</u> ¬				<b>├</b>		
21					59-2740706			<u> </u>
Suite, Apt. #	t, etc.				5. Certificate of Status Desired		•	
City & State		<b>—</b> , '						
Zip	Country		Cou	untry	8. This corporation has liability for it	ntangible tax i		
24	25	29	30		X.			
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered Ag	ent	
				81 Name				
ROBERT	a. May Adelphia drive		8		ess (P.O. Box Number is Not Acceptabl	e)		
JUPITER				83	······································			
				84 City			85 Zir	Code
familiar with SIGNATURE _	ad agent, or both, in the State of Fic in, and accept the obligations of, Se Signature, typed or printed name of registered age	ection 607.0505, Florida Statut	θS.				gistered 	agent. I am
12.	OFFICERS AND DIRECTORS			Program algulature rangamen			IRECTO	RS IN 12
TITLE	DEMICK, GLEN A.		1.1	TITLE			Change	☐ Addition
NAME			1.2 NAME					
STREET ADDRESS	5896 KEITH RD		1.3					
CITY-ST-ZIP	JUPITER FL						Charac	- Addition
TITLE	DEMOK CENY					П	Change	[] Magicion
NAME STORET ADDRESS	Demick, Gena 5896 Keith RD							
STREET ADDRESS CITY-ST-ZIP	JUPITER FL							
TITLE	OUT ITELL TE	☐ DELETE					Change	☐ Addition
NAME			32 N	IAME				
STREET ADDRESS			3.3.	STREET ADDRESS				
CITY - ST - ZIP						··		
TITLE		☐ DELETE	4.1				Change	Addition
NAME				IAME				
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE		TITLE			Change	☐ Addition
NAME		- Secret	5.2 N			اسا		
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP				CITY - ST - ZIP				
TITLE		DELETE	6.1				Change	Addition
NAME			6.21	IAME				
STREET ADDRESS			6.3 \$	TREET ADDRESS				
CITY-ST-ZIP				HTY-ST-ZIP		07/01/1: 5: :		16
certify that	the information indicated on this ar	nnual report or supplemental ar poration or the receiver or trus	nnual report stee empowe	is true and accura	or the exemption stated in Section 119. Ite and that my signature shall have the s report as required by Chapter 607, Fig.	same legal ef	fect as if	' made under

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING PRICE OF DIALET OF PRESIDENT 3-11-96 (407) 743-3683