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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name **J58430**

(6)

D.H.C. ENTERPRISES, INC.

FILED Feb 20 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address					10)1 U1016 B1011 D101	1 5 7411 1 1 1 1 1
1790 SOUTH NOVA ROAD 1790 SOUTH NOVA ROAD								
S. DAYTONA FL 32119-1744 S. DAYTONA FL 32119-1744								
						DO NOT WRITE IN TH	IS SPACE	
						3, Date Incorporated or Qualified		
Principal D	lace of Business	2a, Mailing Addre				02/17/1987 4. FEI Number		-11-15-
2. Principal P	iace of positiess		188			59-2797209	h——	oplied For ot Applicable
21 26						T	\$8.75	
22 27						5. Certificate of Status Desired	Fee Re	
City & State City & State						8. Election Campaign Financing	\$5.00	<u> </u>
23						Trust Fund Contribution	Added t	
Zip				ountry	1	8. This corporation owes or has paid the	current year Intr	angible
24	25	29	30			Personal Property Tax due June 30.		No
	g. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registere	d Agent	
PRICE, HERBERT W. III 81 Nam								
1805 MERCERS HAMMOCK COURT					Street Add	ress (P.O. Box Number is Not Acceptable)		
DELAND FL 32720					0000011100			
				83				
				84	City		85 Zip (Code
					J	F	L L	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florid	a Statutes, the	above	e-named cor	poration submits this statement for the purpose	of changing its	s 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								ļ
	Signature, typed or punted name of registered ag		(NOTE: Registe	red Ape	upet erulangia Ins	red when reinstating) DATE		
12.		ND DIRECTORS	18			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DP	☐ DEL		TITLE			L Change	L] Addition
NAME	PRICE, HERBERT W III	CT.		NAME				ļ
STREET ADDRESS	1805 MERCERS HAMMOCK	UI.	1.3	STREET	ADDRESS			1
CITY-ST-ZIP	DELAND FL. DST DELETE			1.4 CITY-ST-ZIP				114499
TITLE		L D£L		TITLE	ļ		LJ Change	☐ Addition
NAME	QUASNEY, CAROL L.	CT		NAME				
STREET ADDRESS	1805 MERCERS HAMMOCK DELAND FL	U	3		ADDRESS			
CITY-ST-ZIP	VP	T pt:		CITY-S	ST-ZIP		Change	Addition
TITLE	FULTON, SUSIE	□ D£L		TITLE			L Change	☐ Addition
NAME	1805 MERCERS HAMMOCK	ĊŦ		NAME				
STREET ADDRESS	DELAND FL	ŲΙ.			ADDRESS			}
CITY-ST-ZIP	DELAND FE	DEL		CITY-S	ST-ZIP		Change	Addition
TITLE		L. Ott		TITLE			LL CHANGE	L Addition
NAME				NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DEL		CITY-S	T-ZIP		Chrone	Addition
TITLE		L., DEL		TITLE			Change	Addition
NAME				NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		T 68:		CITY-S	T- ZIP			1,220
TITLE		DEL		TITLE			Change	☐ Addition
NAME			1	NAME				
STREET ADDRESS			6.3	STREET	ADDRESS			
CITY-ST-ZIP			6.4	CITY - S	T- ZIP			

14. Thereby 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 chapter on an attachment with an address.