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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 100407

101

1. Corporation	Name NEN # JO242 DLEA INVESTMENT COMPA	\ /					AN	
Principal Place	of Business	Mailing Address					## DIDI# 01911 DIDI# 1001	
501 NORTH GRANDVIEW AVE DAYTONA BEACH FL 32118		P.O. BOX 10506 DAYTONA BEACH FL 32120						
US		US			3. Date incorporated or Qualified 07/07/1987	3a. Date of t	.ast Report 26/1995	
2. Principal Place of Business		2a. Mailing Address 26	- n		4. FEI Number 26-664 1528		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$	8.75 Additional Fee Required	
City & State		27 Oty & State 28	Oty & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
23 <u>/</u> / (: 24]	Country 25	Ζφ 29	Country 30	nan ee an amagaan annaan ng mann	8. This corporation has liability for	intangibie tax un □ No		
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
			81	Name				
	6. LARRY		82	82 Street Address (P.O. Box Number is Not Acceptable)				
	RTH GRANDVIEW AVE		83					
DAYIO	NA BEACH FL 32118							
			84	City		FL	5 Zip Code	
SIGNATURE	Signative ingrediorges to Low constraint besides a 1 ° 1. OFFICERS AND		oft Boye beed Apoles 13.	Angric Distant	ADDITIONS/CHANGES TO OF	DATE FICERS AND DIF	RECTORS IN 12	
10 d	P	DE: FTE	1 1 THEE			c	hange 🔲 Addition	
NAMe	SIMS, G. LARRY		1.2 NAME				:	
STEFFE AT DRESS	5 CIRCLE OAK TR ORMOND BEACH FL		1.3 STREE! AS					
Luft St Zif Irl.F	DS DEACHTE	DELETE	1.4 CHY - ST- 2.1 THLE	ZIP	and the state of the second of		hange 🔲 Addit on	
NAME	SIMS, MARY M		2.2 NAME					
STELET ACORESS	5 CIRCLE OAK TRAIL		2.3 STREET AS	DDRESS				
ONY SE ZIE TOLE	ORMOND BEACH FL. DVP	DELETE	2.4 CHY+ST+ 3.1 TIGE	ZIP	andreas and a second		hange 🗍 Addition	
NAME	BURNETT, RANDOM	(3 2 NAME			U,	lango	
STREET ACORESS	501 NORTH GRANDVIEW AV	E	3 3 STHEET A	DORESS				
City St Zin	DAYTONA BEACH FL		3.4 City - \$1 -	ZiP				
1P.F		☐ DELETE	4 1 TITLE			□ c	hange 🔲 Addition	
NAME STREET ADDRESS			4.2 NAM! 4.3 S1R; (LAI	TIBLESS				
CHr 51-Zif			4.4 CIFY - ST					
Tifut		[]] DELETE	5 1 TIFLE			□ c	hange Addition	
NAM!			5.2 NAME					
STREET ASCISESS			5 3 STREET AL	1				
. (01±-51-2# 14.£		DELETE	5.4 CITY - SI - 6.1 TITLE	Z0°			hange	
NºMÉ		Book of	6.2 NAME	1		_	-	
STREET ADDRESS			6 3 STREET AC	OURESS				
City St ZiF			64 CHY SI-	21F				

14. Let 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 certify 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 or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME & SIGNING OFFICER OR DIRECTOR