

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

APPROVED AND FILED

9 MAY 12 11:10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Morrison
Secretary of State
1901 SUITE 1000, TALLAHASSEE, FLORIDA 32309



DOCUMENT # **J94002** (9)

CDN - SOUTHERN INVESTMENTS, INC.

Principal Place of Business: **DENNY JOHNS
375 S BUMBY AVE
ORLANDO FL 32803
US**

Mailing Address: **DENNY JOHNS
375 S BUMBY AVE
ORLANDO FL 32803
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. State Apt. # etc.	26. State Apt. # etc.	09/21/1987	05/01/1994
22. City & State	27. City & State	4. FEI Number	Applied For
23. Zip	28. Zip	59-2864014	Not Applicable
24. Country	29. Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25. Country	30. Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under § 199.032 Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JOHNS, DENNY 375 S. BUMBY AVENUE ORLANDO FL 32803	B1. Name B2. Street Address (P.O. Box Number, if Not Acceptable) B3. B4. City FL B5. Zip Code

11. Pursuant to the provisions of Sections 607.01(1) and 607.01(2), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent for both or either of the reasons authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with the provisions of Sections 607.01(1) and 607.01(2), Florida Statutes.

SIGNATURE: *Denny Johns Pres. Inc.*

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS, IN:	
TITLE	VP	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUMBERRY, JAMES S	NAME	
STREET ADDRESS	1810 MONASTERY RD	STREET ADDRESS	
CITY, STATE	ORANGE CITY FL	CITY, STATE	
TITLE	P	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNS, DENNY	NAME	
STREET ADDRESS	4408 CHINABERRY DR.	STREET ADDRESS	1816 crown point WOODS Cir
CITY, STATE	ORLANDO FL	CITY, STATE	DOCOE FL 34761
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, STATE		CITY, STATE	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, STATE		CITY, STATE	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, STATE		CITY, STATE	

14. I, the undersigned, certify that the information supplied with this filing is, in all material respects, true and correct, and that my signature shall have the same legal effect as if made under oath. That any officer or director of the corporation who provided the information to make this report as required by Chapter 607, Florida Statutes, and that my signature appears on Block 12 of this report is also true and correct.

SIGNATURE: *Denny Johns Pres. Inc.* 5/4/95 4078980425