

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandia B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K16375 (3)

1. Corporation Name
D & F CONSTRUCTION, INC.



Principal Place of Business
PO BOX 3127
PLANT CITY FL 33564

Mailing Address
PO BOX 3127
PLANT CITY FL 33564

3. Date Incorporated or Qualified 02/23/1988	3a. Date of Last Report 01/18/1995
4. FEI Number 59-2894860	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business 21 2404 Airport Road Suite, Apt. #, etc. 22 City & State Plant City FL Zip 33567	2a. Mailing Address 26 P.O. Box 3147 Suite, Apt. #, etc. 27 City & State Plant City FL Zip 33564
23 Hillsborough 24 33567	25 Hillsborough 26 33564

9. Name and Address of Current Registered Agent

DEAN, WILLIAM L.
2502 BEACHWOOD LANE
VALRICO FL 33594

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL
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. Thereby, accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature typed or printed below, along with the date of signature.

Signature typed or printed below, along with the date of signature.

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	DEAN, WILLIAM L.	
STREET ADDRESS	2502 BEACHWOOD LANE	
CITY-STATE-ZIP	VALRICO FL	
TITLE	D	☐ DELETE
NAME	DEAN, KAREN A.	
STREET ADDRESS	2502 BEACHWOOD LANE	
CITY-STATE-ZIP	VALRICO FL	
TITLE	D	☐ DELETE
NAME	FEASTER, H. FRED	
STREET ADDRESS	2404 AIRPORT RD	
CITY-STATE-ZIP	PLANT CITY FL	
TITLE	D	☐ DELETE
NAME	FEASTER, BARBARA A.	
STREET ADDRESS	2404 AIRPORT RD	
CITY-STATE-ZIP	PLANT CITY FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-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 Book 12 or Book 13 of changes, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PROSSOM

4-24-96

83-752-2422

CR2E034 (12/95)