

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # K56247

(5)

1. Corporation Name

D G ACCOUNTING SERVICES, INC.

Principal Place of Business

**964 JOHN SIMS PARKWAY
NICEVILLE FL 32578**

Mailing Address

**964 JOHN SIMS PARKWAY
NICEVILLE FL 32578**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/29/1988	3a. Date of Last Report 08/15/1994
4. FEI Number 59-2385745	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 § 199.03(2), Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business		2a. Mailing Address	
21		26	
State, Apt. #, etc.		State, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
City	State	City	State
24		29	
25		30	

9. Name and Address of Current Registered Agent

**MCDOWELL, DIANA GAYLE
3 WEST CASE LOMA
MARY ESTHER FL 32569**

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 607.01(2) and 607.01(3), 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. A fee change was authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(2), Florida Statutes.

SIGNATURE

12.	OFFICERS AND DIRECTORS
NAME	PSD MCDOWELL, DIANA GAYLE 3 WEST CASA LOMA DRIVE MARY ESTHER FL
STREET ADDRESS	
CITY	
STATE	
ZIP	
NAME	
STREET ADDRESS	
CITY	
STATE	
ZIP	
NAME	
STREET ADDRESS	
CITY	
STATE	
ZIP	

13.	ADDITIONS CHANGES TO OFFICERS AND DIRECTORS
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY	
STATE	
ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY	
STATE	
ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY	
STATE	
ZIP	

14. I, the undersigned, certify that the information supplied with this filing is complete, true and correct and does not qualify for the exemption stated in Section 199.03(2), 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 this corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 of Block 13 of changed information submitted with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montalvo
Secretary of State
1000 Bay Street, Suite 1000
Tallahassee, Florida 32399-0001

MAY 1 1996 11:05

DOCUMENT # **K56259**

(0)

1. Corporation Name

DICK'S SERVICES, INC.

STATE
TALLAHASSEE, FLORIDA

2. Principal Office Location

**5398 87TH STREET
1904 MARK TWAIN LANE N E
WABASSO FL 32970
US**

3. Mailing Address

**1904 MARK TWAIN LN NE
1904 MARK TWAIN LANE N E
PALM BAY FL 32905
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/30/1988

3a. Date of Last Report
05/01/1994

4. FET Number
59-2929927

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**

7. This corporation's liability for information fees under Chapter 193, Florida Statutes: ☒ Yes ☐ No

2. Principal Office Location

21. State Apt. # etc.

2a. Mailing Address

26. State Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

25. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

**COOK, RICHARD H.
1904 MARK TWAIN LANE N E
PALM BAY FL 32905**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. City

FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0503 and 607.1504, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Richard H. Cook*

Richard H. Cook

4-30-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12a. Title	DP
12b. Name	COOK, RICHARD H.
12c. Street Address	1904 MARK TWAIN LN N E
12d. City & State	PALM BAY FL
12e. Title	
12f. Name	
12g. Street Address	
12h. City & State	
12i. Title	
12j. Name	
12k. Street Address	
12l. City & State	
12m. Title	
12n. Name	
12o. Street Address	
12p. City & State	

13a. 1. Title	☐ Change ☐ Addition
13b. 2. Name	
13c. 3. Street Address	
13d. 4. City & State	
13e. 5. Title	☐ Change ☐ Addition
13f. 6. Name	
13g. 7. Street Address	
13h. 8. City & State	
13i. 9. Title	☐ Change ☐ Addition
13j. 10. Name	
13k. 11. Street Address	
13l. 12. City & State	
13m. 13. Title	☐ Change ☐ Addition
13n. 14. Name	
13o. 15. Street Address	
13p. 16. City & State	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct for the corporation stated on the front of this report as required by Chapter 193, Florida Statutes. I further certify that the information indicated on the original report or supplemental annual report is true and correct and that my signature shall have the same legal effect and make me liable for the same as if it were the signature of the corporation or the person or persons empowered to make the report as required by Chapter 193, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing. I am an officer or director of the corporation.

SIGNATURE: *Richard H. Cook*

Richard H. Cook

4-30-95

589-4777