

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

CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 APR 30 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporation Name

DOVCO ENTERPRISES, INC.

DOCUMENT #
K80622 (9)

Mailing Address

Principal Place of Business

6611 W. BOYNTON BEACH BLVD. 6611 W. BOYNTON BEACH BLVD
BOYNTON BCH. FL 33437 BOYNTON BCH. FL 33437

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

1. Mailing Address	2a. Principal Place of Business	3. Date Incorporated or Qualified	3a. Date of Last Report
1	26	04/17/1989	03/09/1996
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
2	27	65-0117222	Not Applicable
City & State	City & State	5. Certificate of Status Desired	6. Election Campaign Financing Trust Fund Contribution
3	28	\$8.75 Additional Fee Required <input type="checkbox"/>	<input type="checkbox"/>
Zip	Country	7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/>	\$5.00 May Be Added to Fees
25	29	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

TOWE, DONNA
11202 PINE VALLEY DR.
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

1. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE

DATE

Registered Agent Accepting Appointment. (NOTE: Registered Agent signature required when resigning)

2. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	DN/S	1.1 TITLE	
1.2 NAME	TOWE, DAVID J.	1.2 NAME	
1.3 STREET ADDRESS	11202 PINE VALLEY DR.	1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	W. PALM BEACH FL	1.4 CITY - ST - ZIP	
2.1 TITLE	P/T	2.1 TITLE	
2.2 NAME	TOWE, DONNA C.	2.2 NAME	
2.3 STREET ADDRESS	11202 PINE VALLEY DRIVE	2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	W. PALM BCH. FL	2.4 CITY - ST - ZIP	
3.1 TITLE		3.1 TITLE	
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP		3.4 CITY - ST - ZIP	
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP		4.4 CITY - ST - ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP		5.4 CITY - ST - ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP		6.4 CITY - ST - 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97 404-193-2620