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APPROVED

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**CORPORATION
ANNUAL REPORT
1995**



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

95 MAY -1 AM 9:47

DOCUMENT # K90837

(1)

RECEIVED IN STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

DEAN PRITCHETT, INC.

Principal Place of Business

**110 WILLOW TREE LANE
LONGWOOD FL 32750**

Mailing Address

**110 WILLOW TREE LANE
LONGWOOD FL 32750**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/25/1989

3a. Date of Last Report

05/01/1994

4. FBI Number

59-2956925

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. The corporation has liability for intangible tax under § 199 (19)
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GARRICK, DAVID JR.
1705 S. PINE AVE
1006
LONGWOOD FL 32771**

**695 Caliente Way
Alatamonte Springs, FL 32714**

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and State of incorporation)

(Title, Registered Agent signature required when mandating)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

PRITCHETT, DEAN

STREET ADDRESS

110 WILLOWTREE LANE

CITY, ST, ZIP

LONGWOOD FL 32750-2722

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

☐ Change ☐ Addition

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 410 07(3)(b), 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Dean C. Pritchett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95

Date

407-831-0372

Telephone Number