FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L10676** **(9)**

1. Corporation Name

DEB SOCIETY, INC.

Principal Place of Business	Mailing Address
% DAVID L. RANKIN 637 BLAIRSHIRE CIRCLE WINTER PARK FL 32792	% DAVID L. RANKIN 637 BLAIRSHIRE CIRCLE WINTER PARK FL 32792

3. Date Incorporated or Qualified: **08/21/1989**

3a. Date of Last Report: **04/18/1995**

4. FEI Number: **NOT APPLICABLE** ☐ 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 C/O DAVID F. COWAN, JR
~~Suite, Apt. #, etc.~~
22 1501 BELMONT DR.
City & State
23 ORLANDO, FL
Zip 24 32806 Country 25 USA

2a. Mailing Address

26 C/O DAVID F. COWAN JR
~~Suite, Apt. #, etc.~~
27 1501 BELMONT DR.
City & State
28 ORLANDO, FL
Zip 29 32806 Country 30 USA

9. Name and Address of Current Registered Agent

RANKIN, DAVID L.
637 BLAIRSHIRE CIRCLE
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name: DAVID F. COWAN, JR.
82 Street Address (P.O. Box Number is Not Acceptable): 1501 BELMONT DR
83
84 City: ORLANDO FL 85 Zip Code: 32806

11. Pursuant to the provisions of Section 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: D. F. Cowan, JR. DATE: 1/29/96

(NOTE: Registered Agent Signature required when filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE: DST	☒ DELETE	1.1 TITLE: PRESIDENT	☒ Change	☐ Addition
NAME: RANKIN, DAVID L.		1.2 NAME: CRAIG P. JONES		
STREET ADDRESS: 637 BLAIRSHIRE CIRCLE		1.3 STREET ADDRESS: 1501 BELMONT DRIVE		
CITY-ST-ZIP: WINTER PARK FL		1.4 CITY-ST-ZIP: ORLANDO, FL 32806		
TITLE: DP	☐ DELETE	2.1 TITLE: VICE-PRES, + SECRETARY	☐ Change	☒ Addition
NAME: JONES, CRAIG P.		2.2 NAME: WAYNE SCHRADER		
STREET ADDRESS: 637 BLAIRSHIRE CIRCLE		2.3 STREET ADDRESS: 1501 BELMONT DRIVE		
CITY-ST-ZIP: WINTER PARK FL		2.4 CITY-ST-ZIP: ORLANDO, FL 32806		
TITLE	☐ DELETE	3.1 TITLE: TREASURER	☐ Change	☒ Addition
NAME		3.2 NAME: DAVID F. COWAN, JR.		
STREET ADDRESS		3.3 STREET ADDRESS: 1501 BELMONT DR.		
CITY-ST-ZIP		3.4 CITY-ST-ZIP: ORLANDO, FL 32806		
TITLE	☐ DELETE	4.1 TITLE	☐ Change	☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	☐ Change	☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE	☐ Change	☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: D. F. Cowan JR. D.F. COWAN, JR. 1/29/96 407/896-8995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #