

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -6 AM 9: 53

DOCUMENT # L22699 (7)

1. Corporation Name
D & L SOFTWARE SERVICES, INC.

Principal Place of Business

**12945 SEMNOLE BLVD
BLVD. 1 SUITE 11
LARGO FL 34648
US**

Mailing Address

**14142 HETRICK CIRCLE SOUTH
LARGO FL 34644-5213
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/13/1989

3a. Date of Last Report
04/22/1994

2. Principal Place of Business

21 **12122 SEMNOLE BLVD.**

2a. Mailing Address

26

Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

City & State

23 **LARGO, FL**

City & State

28

Zip

24 **34648**

Country

25 **US**

Zip

29

Country

30

4. FEI Number
58-2969996

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

9. Name and Address of Current Registered Agent

**DEJA, DENNIS, M
14142 HETRICK CIR S
LARGO FL 34644**

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

Dennis M. Deja

DENNIS M. DEJA PRESIDENT

3/31/95

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VPS**
NAME **AYRE, RON G.**
STREET ADDRESS **328 WINWARD ISLAND**
CITY - ST - ZIP **CLEARWATER FL**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **DPT**
NAME **DESA, DENNIS**
STREET ADDRESS **14142 HETRICK CIR, S.**
CITY - ST - ZIP **LARGO FL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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 110.07(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 hereon, or on an attachment with my address.

SIGNATURE: *Dennis M. Deja* **PRESIDENT**

3/31/95

813-581-2241

SIGNATURE AND TYPED OR PRINTED NAME OF BRINGING OFFICER OR DIRECTOR

DATE

TELEPHONE NUMBER