

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 PM 2:51

DOCUMENT # L39119

(7)

1. Corporation Name

D.K.R., INC.

Principal Place of Business

Mailing Address

24 N. OCEAN AVE.
MARILYN DURHAM, (P.O. BOX 3097)
DAYTONA BEACH FL 32118

24 N. OCEAN AVE.
MARILYN DURHAM, (P.O. BOX 3097)
DAYTONA BEACH FL 32118

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1989

3a. Date of Last Report

02/25/1994

2. Principal Place of Business

2a. Mailing Address

21

26

P.O. Box 3097

4. FEI Number

58-1651836

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

32126-3097

30

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. 193.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DURHAM, MARILYN
24 NORTH OCEAN AVE
DAYTONA BEACH FL 32118

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 of Secretary of State or Designated Agent

Signature of Registered Agent (Signature required after membership)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
D
DURHAM, MARILYN
24 N. OCEAN AVE
DAYTONA BEACH FL

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
D
KING, DAVID
24 N. OCEAN AVE
DAYTONA BEACH FL

21. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

31. TITLE ☐ Change ☐ Addition

32. NAME

33. STREET ADDRESS

34. CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

41. TITLE ☐ Change ☐ Addition

42. NAME

43. STREET ADDRESS

44. CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

51. TITLE ☐ Change ☐ Addition

52. NAME

53. STREET ADDRESS

54. CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

61. TITLE ☐ Change ☐ Addition

62. NAME

63. STREET ADDRESS

64. 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 193.032(1)(b), Florida Statutes. I further certify that the information submitted 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 transferee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marilyn Durham

MARILYN DURHAM

1-10-95

253-5007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature (Name)