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

CORPORATION ANNUAL REPORT



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

1996

L45890

(5)

DOCUMENT #
1. Corporation Name

**DENNIS KNAUER & SONS, INC.** 

|--|

Principal Place	of Business		ailing Address							
2608 BRIANHO VALRICO FL 3	'E									
						3. Date Incorporated or Qualified 3a. Date of Last Report 01/29/1990 06/21/1995			•	
2. Principal Pla	ce of Business	2a 26	. Mailing Address	<del>,</del>			4. FEI Number 62-1427526			Applied For Not Applicable
Suite, Apt. #	*, etc	27	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State			City & State			Election Campaign Financing     Trust Fund Contribution     Added to Fees				
23 Zip 24	Country 25	29	Zιρ	Cour	ntry		This corporation has liability for Florida Statutes	intangible tax	under s	199.032,
<u>.4</u>	9. Name and Address of Currer		stered Agent				10. Name and Address of New I	Registered A	gent	
		<b>~</b> _			81	Name				
ROLLINS, JACK 4008 GREENMARK LANE VALRICO FL 33594				82 Street Ade			ess (P.O. Box Number is Not Accepta	ble;		
			1		83					
	=			}	84	City		L-1	85 Zi	p Code
						-	ration submits this statement for the pu	FL		
12.	Squature typeston or resistance of registerings OFFICERS AN			<b>13</b> .	TL E		ADDITIONS/CHANGES TO OF		DIRECTO  Change	
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CiTY-SI-ZiP	VALRICO FL			1,4 CI		1				
TITLE	VD		☐ DELETE	2 1 T	TLE				Change	☐ Addition
NAME	KNAUER, ANN M.			2 2 NA	AME	1				
STREET ADDRESS	2608 BRIAN HOLLY DR.					ADDRESS				
CITY - ST - ZIP	VALRICO FL		☐ DELETE	24 Ci		ST ZIP				F 1 4 4 4 5 5 5 5
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality 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 early that I am an officer or director of the corporation of the receiver or trusted 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 or an attachment with an address

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

VICE PACTIZENT