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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # L65036

(0)

1. Corporation Name

STEPHEN K. DENNY, INC.							
Principal Place of Business Mailing Address					E CORPERIO DES ONOS MICOS MAIOS ALFAL	) dili gigit gtali did	
15683 86TH V Palm Beach	NAY N. I GARDENS FL 33418	15683 86TH WAY N. PALM BEACH GARDENS FL 33418					
					3. Date Incorporated or Qualified 04/11/1990	3a. Date of t 02/09	9/1995
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0185353		Not Applicable
Suite, Apt. #	r, etc.	Suite, Apt. #, etc			<ol><li>Certificate of Status Desired</li></ol>		8.75 Additional Fee Required
City & State		Otty & State		6. Election Campaign Financing		5.00 May Be	
23		28			Trust Fund Contribution		Added to Fees
Zip	Country	Zφ	Countr		8. This corporation has liability for	intangible tax un	der s. 199.032;
24	25	29	30		Flonda Statutes Yes	□No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	egistered Age	nt
			81	Name			
DENNY, STEVE			82	Street Add	ress (P.O. Box Number is Not Acceptab	ile)	
	6TH WAY N. EACH GARDENS FL 33418		83				
PALM DI	EACH GARDENS FL 33416						
			84	City		FL  8	5 Zip Code
or registere familiar with SIGNATURE: _	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida: Such change was authorizi tion 607.0505, Florida Statutes	ed by the cor 	poration's boa	ration submits this statement for the purific of directors. I hereby accept the app	ointment as regii	ig its registered office stered agent. I am
	Signature, typical or printed carre, of registere traject COMMON AN	d den steen applie de le (NO) NO DIRECTORS	IF fic protect Apr 13.	nt signature region	r wile ite ist degt ADDITIONS/CHANGES TO OFF	DATE INCEIDS: AND FILE	ECTORS IN 17
12.	PD OFFICENS A!	DELETE 1.1		———Т	ADDITIONS/OFIANGES TO OFF	CLAS AND DIT	
NAME	DENNY, STEPHEN K.		1.2 NAME				
STREET ADDRESS	15683 86TH WAY N			T ADDRESS			
CITY-ST-ZIP	PALM BEACH GDNS FL		1.4 CiTY -				
THLE	DST				Change		hange 🔲 Addition
NAME	DENNY, PAMELA	NY, PAMELA					
STREET ADDRESS	15683 86TH WAY N		2 3 STREET ADDRESS				
City - St - ZiP	PALM BEACH GDNS FL		2.4 CitY+ST+ZIP				
TITLE				1306		c	hange 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			33 STHE	ET ADDRESS			
CITY - ST - ZIP			3 4 CITY				F7
TITLE		☐ D€LETE	4 1 1 1 1 1 1 6			□ c	hange [] Addition
NAME			4.2 NAM6				
STREET ADDRESS				LADDRESS			
CITY-ST-ZIP	DELETE		4.4 CITY - 5.1 TiTU	4 4 CITY - ST - ZIF			hange Addition
TITLE		Писси					nango 🔲 Nadition
NAME STREET ADDRESS			5.2 NAM8	1 ADDRESS			
STREET ADURESS							
TITLE			5 4 CiTY 6 1 TiTLI		Change Addition		hange Addition
NAME		J	6.2 NAME			_	
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			6.4 CiTY				

14. I do hereby certify that the information supplied with this firing 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 circctor 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: 🗸

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 5/1/96 407-748-9554

CR2E034 (12/95)