

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Curtis B. Morkman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L72412** (4)

1. Corporation Name
DENNIS R. LUCAS INC.

APPROVED
AND
FILED
MAY - 1 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: **C/O DENNIS R. LUCAS
10431 WINDSOR WAY
NAPLES FL 33942**

Mailing Address: **C/O DENNIS R. LUCAS
10431 WINDSOR WAY
NAPLES FL 33942**

DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|--------------------|---------------------|--------------------|--|--------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 21 | 1000 TAMMIAMI TRLN | 26 | 1000 TAMMIAMI TRLN | 05/11/1990 | 04/19/1994 |
| Suite, Apt. #, etc | | Suite, Apt. #, etc | | 4. FEI Number | Applied For |
| H 302 | | H 302 | | 65-0202915 | Not Applicable |
| City & State | | City & State | | 5. Certificate of Status Deared | \$8.75 Additional Fee Required |
| | | | | <input type="checkbox"/> | |
| City & State | | City & State | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| | | | | <input type="checkbox"/> | |
| 24 | 33940 | 25 | 33940 | 6. This Corporation has authority for incorporation under S. 190.002, Florida Statutes | |
| | | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| | | | | | | | |
|--|--|--|--|--|--|----|----|
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |
| LUCAS, DENNIS R. 10431 WINDSOR WAY NAPLES FL 33942 | | | | 81 | Name | | |
| | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | |
| | | | | 83 | 1000 TAMMIAMI TRLN H 302 | | |
| | | | | 84 | City | FL | 85 |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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: **DENNIS R. LUCAS PRES** DATE: **4/15/95**

| | | | |
|----------------------------|-------------------|---|--|
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PD | 1.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LUCAS, DENNIS R. | 1.2 NAME | |
| STREET ADDRESS | 10431 WINDSOR WAY | 1.3 STREET ADDRESS | 1000 TAMMIAMI TRLN H 302 |
| CITY ST ZIP | NAPLES FL | 1.4 CITY ST ZIP | 33940 |
| TITLE | VD | 2.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CORBO, DEBRA M. | 2.2 NAME | |
| STREET ADDRESS | 10431 WINDSOR WAY | 2.3 STREET ADDRESS | 4760 TAMMIAMI TRLN H 1A |
| CITY ST ZIP | NAPLES FL | 2.4 CITY ST ZIP | 33940 |
| TITLE | | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY ST ZIP | | 3.4 CITY ST ZIP | |
| TITLE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY ST ZIP | | 4.4 CITY ST ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY ST ZIP | | 5.4 CITY ST ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY ST ZIP | | 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 119.07(4)(a), Florida Statutes. I further certify that the information reflected 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in an attachment with an address.

SIGNATURE: **DENNIS R. LUCAS PRES** DATE: **4/15/95** (R13) 262-5851