

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L94371** (6)

1. Corporation Name

DENNIS LAYTON, INC.



Principal Place of Business

**19900 SW 14TH COURT
PEMBROKE PINES FL 33029**

Mailing Address

**19900 SW 14TH COURT
PEMBROKE PINES FL 33029**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/20/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0212863

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**HOOPER, LARRY K.
711 EAST 38TH ST.
HIALEAH FL 33013**

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 the person who is the registered agent or the person who is the registered agent's authorized representative.

Signature of the person who is the registered agent or the person who is the registered agent's authorized representative.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DPS
LAYTON, DENNIS**
STREET ADDRESS **19900 SW 14TH CT.**
CITY-STATE-ZIP **PEMBROKE PINES FL**

TITLE ☐ DELETE

NAME **T
LAYTON, DENNIS**
STREET ADDRESS **19900 SW 14TH CT.**
CITY-STATE-ZIP **PEMBROKE PINES FL**

TITLE ☐ DELETE

NAME **D
LAYTON, MARK**
STREET ADDRESS **19900 S.W. 14TH COURT**
CITY-STATE-ZIP **PEMBROKE PINES FL**

TITLE ☐ DELETE

NAME **D
WHALLEY, BRIAN**
STREET ADDRESS **3360 SW 23 STREET**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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(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 president 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 TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNIS LAYTON PRES 5-4-96 855-431-0331

CR2E034 (12/95)