FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M13966

(0)

DENNISON MARKETING, INC.

FILED Mar 21 1997 8:00am Secretary of State

randipar mace	e or Business	Mailing Address						
9191 CHIANTI 6 BOYNTON BEA US		9191 CHIANTI COURT BOYNTON BEACH FL US	33437-2461					
		00			Date Incorporated or Qualified 04/15/1985	3a. Date o		Report
2. Principal Pr	ace of Business	2a. Mailing Address	······································		4, FEI Number	<u> </u>	Α	pplied For
21		26			59-2520228		N	ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$		Additional equired
City & State		City & State			Election Campaign Financing			May Be
23		28			Trust Fund Contribution			to Fees
Zgr	Country	Zip	Country		8. This corporation has fiability for it	ntangible tax	under s	199.032,
24	25	29	30			Yes N		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Age	nt	
	inison, douglas G.		81	Name				
	1 CHIANTI COURT		82	Street Add	fress (P.O. Box Number is Not Acceptab	le)		*
ROA	'NTON BEACH FL 33437		83	·				
			53					
			84	City		FL 8	5 Zip	Code
		05 - 1007 7 00 51-31-0			rporation submits this statement for the pation's board of directors. I hereby accep	<u> </u>		ita rapiatare e
	Signidice type for professionance of majors restain	jen and title it application. (NOTE: Registered Age	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIE	RECTO	RS IN 12
_ 12. Till(\$	DELETE	1.1 TITLE		ADDITIONO/OTIANGED TO OTTIO		Change	Addition
NAME	DENNISON, DOUGLAS G.		1.2 NAME					
STREET ADDRESS	9191 CHIANTI COURT		1.3 STREET	ADDRESS				
CPTY - ST - ZPF	BOYNTON BEACH FL		1.4 GHY-5	J-ZIP	33437			
THUE	P	DELETE	2 1 THTLE				Change	Addition
NAME	DENNISON, ARLEEN		2 2 NAME					
STREET ADDRESS	9191 CHIANTI COURT		2.3 STREET					
CHY+S1+Z#	BOYNTON BEACH FL		2. 4 CITY -	ST-ZIP	33437		<u> </u>	
HUE		☐ DELETE	3.1 FITLE	1		LJ	Change	☐ Addition
NAME			3.2 NAME		÷			
STREET ADURESS			3.3 STREET					
CITY ST-7P		DELETE	3.4. CITY-	ST-ZIP			Change	Addition
1016		ביין מנננונ	4.1 TITLE			السا	Sharige	L_J AGUIDI
NAM!			4, 2 NAME 4,3 STREE	ADDOLGG				
STREET ADDRESS. COLY-ST-70°			4.3 STREET					
THUE		DELETE	5 1 TITLE	>1 - 21F			Change	Addition
NAME		lead week for	5.2 NAME			_		
STREET ADDRESS			53 STREET	ADDRESS				
CITY ST-7P			54 CITY-5	i				
THEF	and the second s	DELETE	61 TITLE				Change	Addition
NAM:			6.2 NAME	}				
STREET ADDRESS			6.3 STREE	ADDRESS				
CHY ST 20			6.4 CITY - 5	ST - ZIP				

14. I do hereby cerbly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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

ARLEEN DENNISO 1

3/5/97 561 364-8363