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

### **PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name M13966

(0)

DENNISON MARKETING, INC.

Timelpart race of Business
9191 CHIANTI COURT BOYNTON BEACH FL 33437 US

Mailing Address

9191 CHIANTI COURT

# **FILED** Apr 23 1998 8:00am Secretary of State



**BOYNTON BEACH FL 33437** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>04/15/1985</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2520228 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name DENNISON, DOUGLAS G. 9191 CHIANTI COURT 82 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33437** 8.3 84 City Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Stgnarine, typed or prietrid name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change ☐ Addition 1.1 TITLE TITLE DENNISON, DOUGLAS G. NAME 12 NAME 9191 CHIANTI COURT STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL** CfTY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2 1 TITLE TITLE NAME DENNISON, ARLEEN 2 2 NAME STREET ADDRESS 9191 CHIANTI COURT 23 STREET ADDRESS **BOYNTON BEACH FL** 2 4 CITY-ST-ZIP CITY ST-ZIP DELETE \_\_\_ Change Addition TITLE 3 1 11TLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIF 34. CHTY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City-St-ZiP 44 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREFT ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE ☐ Change Addition NAME 62 NAME 6 3 STREET ADDRESS STREET ADDRESS CUY-ST-ZIP 6 4 CITY - ST - 7/P

14. Thereby certify 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plock 13 if beginning the receiver or trustee employers the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employers 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: Arleen weeding DENNISON

4/14/98

561 364-8363