FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 JUL 14 AM 11:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **M71295** **(3)**

1. Corporation Name
DEMBY & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
2033 MAIN STREET SUITE 304 SARASOTA FL 34237-6049 US	2033 MAIN STREET SUITE 304 SARASOTA FL 34237-6049 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/09/1988
3a. Date of Last Report: 08/30/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 65-0041797 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

9. Name and Address of Current Registered Agent

YANCHER, JOHN A
1515 RINGLING BLVD #900
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name: BEU KAY, ESQ.
82 Street Address (P.O. Box Number is Not Acceptable): 27 FLETCHER AVE.
83:
84 City: SARASOTA FL 85 Zip Code: 34237

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] DATE: 6-10-95
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	DEMBY, DIANA A.	1.2 NAME	DIANA A. DEMBY	
STREET ADDRESS	280 GOLDEN GATE PT. #7	1.3 STREET ADDRESS	2033 MAIN ST #304	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	SARASOTA FL 34237	
TITLE	D	2.1 TITLE	D	☒ Change ☐ Addition
NAME	DEMBY, RAY E.	2.2 NAME	RAY E. DEMBY	
STREET ADDRESS	4149 ESCONDIDO CIR.	2.3 STREET ADDRESS	7661 FAIRWAY WOODS DR	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	SARASOTA FL 34238	
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	DEMBY, MARY JO	3.2 NAME	MARY JO DEMBY	
STREET ADDRESS	4149 ESCONDIDO CIR.	3.3 STREET ADDRESS	7661 FAIRWAY WOODS DR	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	SARASOTA FL 34238	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE	RESIGNED BY MAY 1	☐ Change ☐ 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(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.

SIGNATURE: [signature] 7-6-95 813-951-1941
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
DIANA A DEMBY

0343307 CF