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PROFIT CORPORATION ANNUAL REPORT

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CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M92836

(9)

DOUBLE TAKE ADVERTISING . MARKETING, INC.

Principal Place of Business Mailing Address 836 EAST NEWHAVEN AVE. MELBOURNE FL 32901 536 EAST NEWHAVEN AVE. MELBOURNE FL 32901-5427 3a. Date of Last Report 01/25/1996 3. Date Incorporated or Qualified 08/05/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2907491 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032. 25 29 30 Yes Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent EGAN, MICHAEL WILLIAM 81 Name 1001 ROANOKE CT. N.E. 82 Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32007 83 City 85 Zip Code 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, typod or printed name of registered agent and title if applicable. (NOTL: Registered Agent signature required when reinstating) 112. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)TITLE DELETE 1.1 TITLE ☐ Change ___ Addition BEASLEY, DENISE A. NAME . 12 NAME 2490 FOREST RUN DRIVE STREET ADDRESS 1.3 STREET ADDRESS W. MELBOURNE FL CITY-ST-ZIP 1.4 City - \$1 - ZIP DELETE TITLE 2.1 TITLE Change Addition BEASLEY, DENISE A. NAME 2.2 NAME 2490 FOREST RUN DRIVE STREET ADDRESS 2.3 STREET ADDRESS W. MELBOURNE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - \$1 - ZIP TITLE DELETE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS

14. I do hereby 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 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.

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