

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054356

FILED
Feb 29, 2004
Secretary of State

Entity Name: DEALERS CONTRACT SERVICES, INC.

Current Principal Place of Business:

609 S.E. 22ND STREET
CAPE CORAL, FL 33990

New Principal Place of Business:

5243 RED CEDAR DR
#5
FT. MYERS, FL 33907

Current Mailing Address:

609 S.E. 22ND STREET
CAPE CORAL, FL 33990

New Mailing Address:

5243 RED CEDAR DR
#5
FT. MYERS, FL 33907

FEI Number: 65-1013414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEVELLE, DONALD S
609 S.E. 22ND STREET
CAPE CORAL, FL 33990

Name and Address of New Registered Agent:

BEVELLE, DONALD S
5243 RED CEDAR DR
#5
FT. MYERS, FL 33907

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DONALD S BEVELLE

02/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEVELLE, DONALD S
Address: 609 S.E. 22ND STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: SD () Delete
Name: BEVELLE, CARISSA K
Address: 609 S.E. 22ND STREET
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEVELLE, DONALD S
Address: 5243 RED CEDAR DR #5
City-St-Zip: FT. MYERS, FL 33907

Title: SD (X) Change () Addition
Name: LOTHER, HEATHER S
Address: 5243 RED CEDAR DR#5
City-St-Zip: FT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEATHER LOTHER

SD

02/29/2004

Electronic Signature of Signing Officer or Director

Date