

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90028 023 ***150.00

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1. Entity Name

DANNAHOWER HOLDINGS, INC.



Principal Place of Business

809 SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950

Mailing Address

809 SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/05)

Zip

Country

Zip

Country

4. FEI Number

14-1858411

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANNAHOWER, WILLIAM R
809 SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME DANNAHOWER, WILLIAM R
STREET ADDRESS 809 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP FORT PIERCE FL 34950

TITLE D ☐ Delete
NAME DANNAHOWER, LUCIA S
STREET ADDRESS 809 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP FORT PIERCE FL 34950

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME DANNAHOWER, WILLIAM D.
STREET ADDRESS 2017 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP FORT PIERCE, FL 34950

TITLE ☐ Change ☒ Addition
NAME DANNAHOWER, JAMES L.
STREET ADDRESS 2015 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP FORT PIERCE FL 34950

TITLE ☐ Change ☒ Addition
NAME LINDA NUNN
STREET ADDRESS 1807 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP FORT PIERCE, FL 34950

TITLE ☐ Change ☒ Addition
NAME DANNAHOWER STEPHEN B.
STREET ADDRESS 4383 ISLAND COVE LANE
CITY-ST-ZIP CHARLOTTE NC 28216

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William D. DanNAhower 2-15-06 772-618-0259

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #