

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 21 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P25074 (6)

1. Corporation Name

DELRAY INTRACOASTAL CORP.

Principal Place of Business

800 2ND AVENUE
DES MOINES IA 50309

Mailing Address

800 2ND AVENUE
DES MOINES IA 50309

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/06/1989

3a. Date of Last Report

04/21/1994

4. FEI Number

42-1201836

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME THURSTON, STANLEY G.
STREET ADDRESS 665 HARWOOD DR
CITY-ST-ZIP DES MOINES FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE S
NAME STRUTT, DAVID S.
STREET ADDRESS 301 41ST STREET
CITY-ST-ZIP W. DES MOINES IA

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE T
NAME NEIS, ARTHUR V.
STREET ADDRESS 1575 NW 106TH COURT
CITY-ST-ZIP DES MOINES IA

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME WEITZ, FRED W.
STREET ADDRESS 1245 BROWNS WOODS DR
CITY-ST-ZIP DES MOINES IA

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE V
NAME KENNY, EDWARD R.
STREET ADDRESS 209 TONAWANDA DR.
CITY-ST-ZIP DES MOINES IA

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PD
NAME KLEMMER, D. WILLIAM
STREET ADDRESS 5408 SHRIVER
CITY-ST-ZIP DES MOINES IA

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information provided with this report is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this 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 registered agent is empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/95

Date

515
525-245-7620

(Daytime Phone #)

DELRAY INTRACOASTAL CORP
42-1201836

As of 3/01/95 the Officers and Directors change to
the following:

WEITZ, Fred W.
800 Second Avenue
Des Moines, Iowa 50309

Officer & Director

WEITZ, Stevenson
800 Second Avenue
Des Moines, Iowa 50309

Director

HOTOVEC, William J.
800 Second Avenue
Des Moines, Iowa 50309

Officer