

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P38490** (9)

1. Corporation Name

VERNON DANIEL COMPANY

Principal Place of Business

**7233 SOUTHERN BLVD
B-2
WEST PALM BEACH FL 33405
US**

Mailing Address

**8805 COMMERCE COURT
MANASSAS VA 22110
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/20/1992		3a. Date of Last Report 03/24/1995	
21 1400 C Forsythe Road		26		4. FEI Number 54-1056382		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 West Palm Beach, FL		28		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
24 Zip 33406		25 Country USA		29 Zip		30 Country	

9. Name and Address of Current Registered Agent

**DANIEL, VERNON
1401-C ALLENDALE RD. 1400 C Forsythe Rd
WEST PALM BEACH FL 33406
33406**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84	
FL 85 Zip Code	33406

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 607.0503, Florida Statutes.

SIGNATURE

Signature of Corporation or Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☒ Change ☐ Addition
NAME	DANIEL, VERNON	1.2 NAME	
STREET ADDRESS	1401-C ALLENDALE RD	1.3 STREET ADDRESS	8805 Commerce Court
CITY-ST-ZIP	WEST PALM BCH FL	1.4 CITY-ST-ZIP	Manassas, VA 22110
TITLE	DTS	2.1 TITLE	☒ Change ☐ Addition
NAME	DANIEL, JOANN	2.2 NAME	
STREET ADDRESS	1401-C ALLENDALE RD	2.3 STREET ADDRESS	8805 Commerce Court
CITY-ST-ZIP	WEST PALM BCH FL	2.4 CITY-ST-ZIP	Manassas, VA 22110
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	DEMUTH, THOMAS J	3.2 NAME	
STREET ADDRESS	8805 COMMERCE COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	MANASSAS VA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	☐ Change ☐ Addition
NAME	COPPA, MICHAEL D.	4.2 NAME	
STREET ADDRESS	1401-C ALLENDALE ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	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	☐ 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)(k), 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-in-power, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T. DeMunt

4/19/96

703-321-5525

CR2E034 (12/95)