FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000037489 (0)

DITCO OF CENTRAL FLORIDA, INC.

FILED Feb 24 1998 8:00am Secretary of State



						} [
Principal Place of Business Mailing Address									
1240 LAMBER		1240 LAMBERT AVENUE FLAGLER BCHFL FLGLER BEACH FL 32136 US							
FLGLER BEAC	OH FL 32136					DO NOT WRITE IN THIS SPACE			
. 00						3. Date Incorporated or Qualified			
						05/21/1993		,	
2. Principal Pl	ace of Business	2a. Mailing Address				4, FEI Number	A	plied For	
21 1240	CAMBERT AVE.	26 4 54m &				59-3194325 Not Applicable			
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75		
	LER BENCH, FC.	27				B. Certificate of Statos Desired	Fee Re	quired	
City & State		City & State				6, Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	Added t		
Zip Country		Z ₁ p Country				8. This corporation owes or has paid the		'	
24 32136 25 USA 9, Name and Address of Current		29 30			Personal Property Tax due June 30. Yes No				
DI N	PPEL, CHARLES W	neglatered Agent		81	Name	10, Name and Address of New Neglation	od Agent		
	8 S. RIDGEWOOD AVENUE		L	_					
	TE 6			82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
	YTONA BEACH FL 32114		<u> </u>	B3					
O 1,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
				84	City	F	85 Zip (Code	
11, Pursuant I	to the provisions of Sections 607 0502	and 607.1508, Florida Statuto	s, the ab	ove-	named corp	poration submits this statement for the purpose ion's board of directors. I hereby accept the a		s registered	
office or re agent. Las	egistered agent, or both, in the State on familiar with, and accept the obliga	of Horida. Such change was a tions of, Section 607.0505, Flo	uthorized rida Statu	ı by I Jes.	the corporati	ion's board of directors. I hereby accept the a	ippointment as	registered	
CIONATURE	1 cla					2/18	197		
OIOITATOTE:	Signature, byted or printed name of registered ages		Registered	Agent	l signature require	ed when reinstating) DATE	(1	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	DITTBENNER, DALE	1.2 N		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS			☐ Change	Addition	
NAME	1240 LAMBERT AVENUE							1	
STREET ADDRESS	FLGLER BEACH FL 32136								
CITY - ST - ZIP TITLE	VD			1.4 CITY-ST-ZIP 2.1 TITLE		and the second s	Change	Addition	
NAME	DITTBENNER, EILEEN		•	22 NAME			Change		
STREET ADDRESS	1240 LAMBERT AVENUE	235		23 STREET ADDRESS				1	
CITY-ST-ZIP	FLGLER BEACH FL 32136			2 4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			
TITLE		DELETE	31 TITLE				Change	Addition	
NAME	32			3.2 NAME 3.3 STREET ADDRESS			-	,	
STREET ADDRESS			3.3 STF						
CITY-ST-ZIP	3.4		3.4. CI1	<u> </u>	- ZIP				
TITLE		☐ DELETE 4.1 T		LĒ			Change	Addition	
NAME			4. 2 NA	IME					
STREET ADDRESS		4.3 ST		REET A	ADDRESS				
CITY-ST-ZIP			4.4 CIT		- ZIP				
TITLE		☐ DELETE	5.1 TITI				☐ Change	Addition	
NAME			5.2 NAI						
STREET ADDRESS			5.3 STR	REETA	ADDAESS				
CITY-ST-ZIP			5.4 CH		- ZiP				
TITLE		DELETE 6.1.1					☐ Change	Addition	
NAME			6.2 NAI						
STREET ADDRESS					(DDRESS				
CITY - ST - ZIP			6.4 CIT	Y-\$T-	- ZiP				

14. Thereby certify that the Information supplied with this filling 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 eath; 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.

SIGNATURE:

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2/18/97

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