## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Oct 01 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

P93000054429 (4)

DAYNE C. DUKES LTD. INC.

Oringinal Plan	o of Businese	Malling Address	<del></del>	
•				
5370 CEDAR LANE BROOKSVILLE FL 34801		5370 CEDAR LANE BROOKSVILLE FL 34601		
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
		<del> </del>		08/02/1993
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		59-3161266 Not Applicable
Suite, Apt #, etc.		Sulte, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May 8e
23		28]	1 0	Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible     Personal Property Tax due June 30.  Yes  No
24	25	29	30]	
	9. Name and Address of Current	Registered Agent	81 Na	10. Name and Address of New Registered Agent me
DUKES, DAYNE C			"	
	CEDAR LANE		82 St	eet Address (P.O. Box Number is Not Acceptable)
BROOKSVILLE FL 34601			83	
			63	
			84 Ci	y FL 85 Zip Code
11. Pursuani	to the Provisions of costions 507 0503	and COT 4EOD Elected Stated	or the should part	ed corporation submits this statement for the purpose of changing its registered
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was tions of, section 607.0505, F	authorized by the lorida Statutes.	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and little if annicable	IO1 F: Panistered Anant s	gnature required when reinstating) DATE
12.	OFFICERS ANI	······································	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	DUKES, DAYNE C	(	1.2 NAME	
STREET ADDRESS	5370 CEDAR LANE		1,3 STREET ADDR	FSS
CITY-ST-ZIP	BROOKSVILLE FL 34601		1.4 CITY-ST-ZIP	
TITLE	VPST	DELETE	2.1 TITLE	Change Addition
NAME	DUKES-GUSTAFSON, ROSE V	ب مددد اد	2.2 NAME	Johnson Line
STREET ADDRESS	5370 CEDAR LANE		2.3 STREET ADDR	FSS
CITY-ST-ZIP	BROOKSVILLE FL 34601		2.4 CITY-ST-ZIP	
TITLE	DROOKOVILLE TE 04001	DELETE	3.1 TITLE	Change Addition
NAME		[] DELETE	3.2 NAME	Change C Addition
			3.3 STREET ADDR	ree
STREET ADDRESS				233
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZiP	Change Addition
		LJ DELETE	4.2 NAME	Change Addition
NAME				
STREET ADDRESS			4.3 STREET ADDR	158
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDR	ESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS	•		8.3 STREET ADDR	ESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP	<u> </u>

14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this annual report or suppliemental annual report is true grid 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 employered 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 of an attachment with an advises.