

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000009262**  
1. Corporation Name  
**DACT REAL ESTATE CORPORATION OF C.A.**

Principal Place of Business: **8340 AMERICAN WAY GROVELAND, FL. 34736**  
Mailing Address: **P.O. Box 625 GROVELAND, FL. 34736**

2. Principal Place of Business: **8340 American Way Groveland, FL. 34736**  
2a. Mailing Address: **P.O. Box 625 Groveland, FL. 34736**  
23. City & State: **Groveland, FL.**  
24. Zip: **34736** 25. Country: **USA**  
29. Zip: **34736** 30. Country: **USA**

3. Date Incorporated or Qualified: **1/28/94**  
3a. Date of Last Report: [ ]  
4. FEI Number: **59-3222508**  
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

9. Name and Address of Current Registered Agent: **Philip R. Fulmer, 8000 Cherry Lake Rd., Groveland, FL. 34736**  
10. Name and Address of New Registered Agent: **Philip R. Fulmer, 8000 Cherry Lake Rd., Groveland, FL. 34736**

I, the undersigned, being duly sworn, depose and say that the above named corporation submits this statement for the purpose of changing its registered office or registered agent, 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]* DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>P</b>	NAME: <b>FULMER, BARBARA</b>	1. TITLE: [ ] Change [ ] Addition	
STREET ADDRESS: <b>8971 CHARLESTON PK.</b>	CITY-ST-ZIP: <b>ORLANDO, FL. 32819</b>	2. NAME: [ ] Change [ ] Addition	
TITLE: <b>VP</b>	NAME: <b>TURNER, CYNTHIA F.</b>	3. STREET ADDRESS: [ ] Change [ ] Addition	
STREET ADDRESS: <b>137 HARTINGTON DR.</b>	CITY-ST-ZIP: <b>MADISON, AL. 35758</b>	4. CITY-ST-ZIP: [ ] Change [ ] Addition	
TITLE: <b>VP</b>	NAME: <b>FULMER, PHILIP R.</b>	5. TITLE: [ ] Change [ ] Addition	
STREET ADDRESS: <b>8000 CHERRY LAKE RD.</b>	CITY-ST-ZIP: <b>GROVELAND, FL. 34736</b>	6. NAME: [ ] Change [ ] Addition	
TITLE: <b>VP</b>	NAME: <b>FULMER, TIMOTHY A.</b>	7. STREET ADDRESS: [ ] Change [ ] Addition	
STREET ADDRESS: <b>9239 WOODBREEZE BLVD</b>	CITY-ST-ZIP: <b>WINDERMERE, FL. 32819</b>	8. CITY-ST-ZIP: [ ] Change [ ] Addition	
TITLE: <b>S</b>	NAME: <b>FULMER, CARROLL A.</b>	9. TITLE: [ ] Change [ ] Addition	
STREET ADDRESS: <b>14726 GORD NECK DR.</b>	CITY-ST-ZIP: <b>MONTEVERDE, FL. 34756</b>	10. NAME: [ ] Change [ ] Addition	
TITLE: <b>COB</b>	NAME: <b>FULMER, CARROLL L.</b>	11. STREET ADDRESS: [ ] Change [ ] Addition	
STREET ADDRESS: <b>8971 CHARLESTON PK.</b>	CITY-ST-ZIP: <b>ORLANDO, FL. 32819</b>	12. CITY-ST-ZIP: [ ] Change [ ] Addition	

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 supplier's 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 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: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: \_\_\_\_\_

CR2E034 (12/95)

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