

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 # P94000038572 (1)

1. Corporation Name

D.D. PIERSON ENTERPRISES, INC.



Principal Place of Business

1525 BELLA CASA CT.  
MERRITT ISLAND FL 32952

Mailing Address

1525 BELLA CASA CT.  
MERRITT ISLAND FL 32952

3. Date Incorporated or Qualified

05/18/1994

3a. Date of Last Report

03/02/1995

2. Principal Place of Business

2a. Mailing Address

21 DYNAMIC POWDER COATING  
Suite, Apt. #, etc.

26 DYNAMIC POWDER COATING  
Suite, Apt. #, etc.

4. FEI Number

59-3245098

Applied For

Not Applicable

22 410 A SHEARER BLVD.  
City & State

27 410 A SHEARER BLVD  
City & State

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23 COCOA FL  
Zip Country

28 COCOA FL  
Zip Country

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24 32922 25 USA

29 32922 30 USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PIERSON, DERALD D  
1525 BELLA CASA CT.  
MERRITT ISLAND FL 32952

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 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and then if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PTD	PIERSON, DERALD D	1525 BELLA CASA CT.	MERRITT ISLAND FL	<input type="checkbox"/>
VSD	PIERSON, PHYLLIS M.	1525 BELLA CASA CT.	MERRITT ISLAND FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1	VD	DWIGHT J. EASTERLY	1500 HOLIDAY	<input type="checkbox"/>
2.1	VD	PHYLLIS M. PIERSON	1525 BELLA CASA CT	<input checked="" type="checkbox"/>
3.1				<input type="checkbox"/>
4.1				<input type="checkbox"/>
5.1				<input type="checkbox"/>
6.1				<input type="checkbox"/>
7.1				<input type="checkbox"/>
8.1				<input type="checkbox"/>
9.1				<input type="checkbox"/>

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 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 as an attachment with an address.

SIGNATURE: DERALD D. PIERSON  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/96 (407) 639-4025  
DATE Daytime Phone #

CR2E034 (12/95)