

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 # P94000057160 (1)

1. Corporation Name
DEXCO TREE FARMS, INC



Principal Place of Business

8834 N. 56TH ST.
TAMPA FL 33617
US

Mailing Address

16503 VILLESPIAN CT.
TAMPA FL 33613

3. Date Incorporated or Qualified 08/01/1994 3a. Date of Last Period 04/07/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
26 8834 N. 56TH ST.
27 Suite, Apt. #, etc.
28 TAMPA, FL
29 33617
30 USA

4. FEI Number 59-3229554 Applied For Not Applicable

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

FELKER, ALAN R.
16503 VILLESPIAN CT.
TAMPA FL 33613

10. Name and Address of New Registered Agent

81 Name ALAN R. FELKER
82 Street Address (P.O. Box Number is Not Acceptable) 8834 N. 56TH ST
83
84 City TAMPA FL 85 Zip Code 33617

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

ALAN R. FELKER

2/15/96.

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE PST
12.2 NAME FELKER, ALAN R.
12.3 STREET ADDRESS 16503 VILLESPIAN CT
12.4 CITY-STATE-ZIP TAMPA FL
12.5 TITLE ☐ DELETE
12.6 NAME
12.7 STREET ADDRESS
12.8 CITY-STATE-ZIP
12.9 TITLE ☐ DELETE
12.10 NAME
12.11 STREET ADDRESS
12.12 CITY-STATE-ZIP
12.13 TITLE ☐ DELETE
12.14 NAME
12.15 STREET ADDRESS
12.16 CITY-STATE-ZIP
12.17 TITLE ☐ DELETE
12.18 NAME
12.19 STREET ADDRESS
12.20 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE PST
13.2 NAME FELKER, ALAN R.
13.3 STREET ADDRESS 8834 N. 56TH ST
13.4 CITY-STATE-ZIP TAMPA, FL - 33617
13.5 TITLE ☒ Change ☐ Addition
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY-STATE-ZIP
13.9 TITLE ☐ Change ☐ Addition
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY-STATE-ZIP
13.13 TITLE ☐ Change ☐ Addition
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY-STATE-ZIP
13.17 TITLE ☐ Change ☐ Addition
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY-STATE-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)(c), 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 on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN R. FELKER 2/15/96

Date

Daytime Phone

212 800-8404

CR2E034 (12/95)