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CORPORATION ANNUAL REPORT



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

1996

P94000063357 (5) DOCUMENT #

D AND L INC. OF BRADENTON Principal Place of Business Mailing Address 5966 7TH AVE WEST 5966 7TH AVE WEST **BRADENTON FL 34209 BRADENTON FL 34209** 3. Date Incorporated or Qualified 3a. Date of Last Report 08/01/1994 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0508074 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHALLENKAMP, DANIEL R Street Address (P.O. Box Number is Not Acceptable) 82 5966 7TH AVE WEST **BRADENTON FL 34209** 83 R4 City Zip Code 85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Ringistered Agent signature required when reinstating) 12. (12/95)OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVTS THE DELETE 1. 1 TITLE Change ☐ Addition SCHALLENKAMP, DANIEL R NAME 1.2 NAME CR2E034 5966 7TH AVE WEST STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL** CITY-ST-2IP 14 C/TY-ST-7/P TITLE DELETE 2. 1 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHIY-ST-ZIP 24 CITY-ST-ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4. 1 TITLE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP TITLE DELETE 5. 1 TITLE Change ☐ Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-S1-ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STHEET ADDRESS 63 STREET ADDRESS

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 coats; 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

6 4 CITY - ST - ZIP

SIGNATURE: 0

4/16/96 (941)795-4498