FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400067671 (5)

DENNIS GOFF & SONS, INC.

FILED Mar 25 1998 8:00am Secretary of State

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Principal Place	e of Business		М	ailing Address				I TORINORI NIO ADVIL ETRAJ OBJET DO	II AAIIA Biil		TALL THEN HAND
24239 YACHT CLUB BLVD PUNTA GORDA FL 33955 24239 YACHT CLUB BLVD PUNTA GORDA FL 33955				DO NOT WRITE	IN THIS S	SPACE					
								3. Date Incorporated or Qualified			$\overline{}$
								09/12/1994			
2. Principal Pl	lace of Busine	988	2a.	Mailing Address				4. FEI Number		Ar	pplied For
21			26					65-0517703			ot Applicable
Suite, Apt.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & State	e		28	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip		Country		Zip	p Country			8. This corporation owes or has paid the current year Intangible			
24			29		30			Personal Property Tax due June			□ No
	9. Name a	ind Address of Curre	nt Regis	tered Agent		1	r	10. Name and Address of New Re	gistered .	Agent	
	ks, david k					81	Name				
252 W MARION AVE PUNTA GORDA FL 33950				82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)	···			
, ,					ľ	83					
						84	City	· · · · · · · · · · · · · · · · · · ·	FL	85 Zip	Code
11. Pursuant i	to the provisio	ns of Sections 607.05	02 and 6	07 1508 Florida Statut	les the ab	OVE	a-named corp	oration submits this statement for the r		changing i	ts registered
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		r printed name of registered as		-,							
12.	Signature, lythod th	OFFICERS AN			13.	Age	int signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDG AND	DIRECTOR	2S IN 12
TITLE	PD	017702110711	100 000000	DELETE	1.1 117	LF		ADDITIONS/OFFICIALISTS TO OFFICE	LIIO AND	Change	Addition
NAME	GOFF, DI	ENNIS			1.2 NA						
STREET ADDRESS		CHT CLUB BLVD					ADORESS				
CITY-ST-ZIP		ORDA FL 33955			1.4 CIT						
TITLE	T			☐ DELETE	2.1 TIT					Change	Addition
NAME	GOFF, JA	SON S			2.2 NA	ME				-	·
STREET ADDRESS		CHT CLUB BLVD			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP		ORDA FL 33955			2. 4 Cf						ŀ
TITLE	S			DELETE	3.1 TITLE				•	Change	Addition
NAME	GOFF, DE	ENNIS C			3.2 NA	ME					
STREET ADDRESS		ODLAWN AVE			3.3 ST	IEET	ADDRESS				-
CITY-ST-ZIP	PUNTA G	ORDA FL			3.4. CF	Y-S	ST-ZIP				ŀ
TITLE				☐ DELETE	4.1 TiT	LE				Change	Addition
NAME					4. 2 NA	ME					ŀ
STREET ADDRESS					4.3 ST	REET	ADDRESS				
CITY-ST-ZIP					4.4 CIT	Y - S	T-ZIP				
TITLE				☐ DELETE	5.1 TtT	LE				Change	Addition
NAME					5.2 NA	ME					
STREET ADDRESS					5.3 \$TF	REET	ADDRESS				
CITY-ST-ZIP					5.4 CIT	Y-5	T-ZIP				
TITLE				☐ DELETE	6.1 TIT	E				Change	Addition
NAME					6.2 NA	JIE.					
STREET ADDRESS					6.3 STF	REET	ADDRESS				
CITY-ST-ZIP					6.4 CIT	Y-\$	T- ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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: