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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000070567 (0)

1. Corporation Name

DESIGNER DECKS SOUTH, INC.



Principal Place of Business

5150 ROYAL PALM AVE  
SARASOTA FL 34234

Mailing Address

5150 ROYAL PALM AVE  
SARASOTA FL 34234

2. Principal Place of Business

2a. Mailing Address

21 8251 15th ST E

26 8251 15th ST E

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE C

27 SUITE C

City & State

City & State

23 SARASOTA, FL

28 SARASOTA, FL

Zip

Country

Zip

Country

24 34243

25 MANATEE

29 34243

30 MANATEE

9. Name and Address of Current Registered Agent

GRAVES, JUDY M  
5150 ROYAL PALM AVE  
SARASOTA FL 34234

81 Name

George Hayes

82 Street Address (P.O. Box Number is Not Acceptable)

8251 15th ST E

83

SUITE C

84 City

SARASOTA

FL

85 Zip Code

34243

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

George R Hayes

Signature typed or printed name of registered agent, and date of registration.

3/27/96

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P HAYES, RONALD  
5150 ROYAL PALM AVE.  
SARASOTA FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VPST GRAVES, JUDY  
5150 ROYAL PALM AVE.  
SARASOTA FL

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

HAYES GEORGE  
8251 15th ST E  
SARASOTA, FL 34243

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

KRUPNICK JEFFREY

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-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)(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 or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

George R Hayes

3/27/96 941 359-3697

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