

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000071439 (1)

1. Corporation Name

DORA INVESTMENT COMPANY



Principal Place of Business

400 FIFTH AVE. SOUTH  
SUITE 304  
NAPLES FL 33940  
US

Mailing Address

400 FIFTH AVENUE SOUTH  
SUITE 304  
NAPLES FL 33940  
US

3. Date Incorporated or Qualified  
09/28/1994

3a. Date of Last Report  
03/30/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
65-0531111

Applied For  
Not Applicable

21. Subj. Apt. #, etc.

26. Subj. Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

23. Zip

Country

28. Zip

Country

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

24.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE FL 32301

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 607.0102 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if different from the corporation)

Signature of Registered Agent (if different from the corporation)

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME  
12.2 STREET ADDRESS  
12.3 CITY, ST, ZIP  
12.4 TITLE  
12.5 NAME  
12.6 STREET ADDRESS  
12.7 CITY, ST, ZIP  
12.8 TITLE  
12.9 NAME  
12.10 STREET ADDRESS  
12.11 CITY, ST, ZIP  
12.12 TITLE  
12.13 NAME  
12.14 STREET ADDRESS  
12.15 CITY, ST, ZIP  
12.16 TITLE

PTD  
MOORE, WENDY W  
1800 GALLEON DRIVE  
NAPLES FL  
VD  
WATERMAN, JR. A PORTER  
12841 DUNBAR ROAD  
GLEN ELLEN CA  
VD  
KELLER, SANDRA W  
4461 WELD COUNTY ROAD, #31  
FORT LUPTON CO  
S  
MOORE, LEEANN  
1800 GALLEON DRIVE  
NAPLES FL  
D  
WATERMAN, STEPHEN P  
747 RIVENROCK ROAD  
MONTECITO CA

☐ DELETE  
☐ DELETE  
☐ DELETE  
☒ DELETE  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY, ST, ZIP  
13.5 TITLE  
13.6 NAME  
13.7 STREET ADDRESS  
13.8 CITY, ST, ZIP  
13.9 TITLE  
13.10 NAME  
13.11 STREET ADDRESS  
13.12 CITY, ST, ZIP  
13.13 TITLE  
13.14 NAME  
13.15 STREET ADDRESS  
13.16 CITY, ST, ZIP  
13.17 TITLE

☐ Change ☐ Addition  
☐ Change ☐ Addition  
☐ Change ☐ Addition  
☐ Change ☐ Addition  
☐ Change ☐ Addition  
☐ Change ☐ Addition  
☐ Change ☐ Addition  
☐ Change ☐ Addition

P.O. Box 474  
Dorsett, VT 05251

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 on an attachment with an address.

SIGNATURE:

*Wendy W. Moore*  
Wendy W. Moore

President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96

(941) 261-0567

Date

Day or Month

CR2E034 (12/95)