

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 # P94000076596 (3)

1. Corporation Name

DCF GROUP, INC.



Principal Place of Business

9424 BAYMEADOW ROAD SUITE 130
JACKSONVILLE FL 32256

Mailing Address

9424 BAYMEADOW ROAD SUITE 130
JACKSONVILLE FL 32256

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MAXWELL, RONALD W
4811 ATLANTIC BLVD SUITE 4
JACKSONVILLE FL 32207-2129

3. Date Incorporated or Qualified
10/13/1994

3a. Date of Last Report
04/24/1995

4. FEI Number

NOT APPLICABLE

69-3314624

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

10. Name and Address of New Registered Agent

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 607.0502 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

Signature line for principal place of business, agent, or other applicable

Signature line for registered agent, or other applicable

DSH

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DPST
WIGGINS, C D
1461 HOPKINS CREEK LANE
NEPTUNE BEACH FL 32266

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
FANE, MITCHELL C
9424 BAYMEADOW ROAD SUITE 130
JACKSONVILLE FL 32256

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
GOELDNER, RICHARD W II
9424 BAYMEADOW ROAD SUITE 130
JACKSONVILLE FL 32256

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

☐ Change

☐ Addition

2. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

☐ Change

☐ Addition

3. TITLE

3. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

☐ Change

☐ Addition

4. TITLE

4. NAME

4. STREET ADDRESS

4. CITY - ST - ZIP

☐ Change

☐ Addition

5. TITLE

5. NAME

5. STREET ADDRESS

5. CITY - ST - ZIP

☐ Change

☐ Addition

6. TITLE

6. NAME

6. STREET ADDRESS

6. CITY - ST - ZIP

☐ Change

☐ Addition

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:

C. Donald Wiggins

C. Donald Wiggins

4/25/96

904-731-7221

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)