

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMARA B. WALKER
Secretary of State
1000 Florida Capitol Mall, Tallahassee, FL 32304

DOCUMENT # **P94000086825 (4)**

1. Corporation Name

DION CONSULTING, INC.

APPROVED
AND
FILED
95 MAY -1 AM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Location: **2255 PALM TREE DRIVE
PUNTA GORDA FL 33950**
Mailing Address: **P.O. DRAWER 1447
PUNTA GORDA FL 33951-1447**

DO NOT WRITE IN THIS SPACE

3. Date incorporated (Month/Day/Year) 11/30/1994	3a. Date of Last Report
4. FEI Number 65-0553075	Applies 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. Does corporation file liability for intangible tax under S. 194.002, Florida Statutes ☐ Yes ☒ No	

2. Principal Office of Business	2a. Mailing Address
21. State App. No.	26. State App. No.
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

B. Name and Address of Current Registered Agent

**HACKETT, JACK O II
115 WEST OLYMPIA AVE.
PUNTA GORDA FL 33950**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Applicable)
83. City
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 609.01 and 609.02, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, as the State of Florida. Such change was authorized by the corporation's board of directors, a body, except the appointment as registered agent, I am authorized to accept the appointment of the State of Florida Statutes.

SIGNATURE

12. OFFICER, DIRECTOR, OR SHAREHOLDER	13. AUTHORIZED AGENT, OFFICER, DIRECTOR, OR SHAREHOLDER
NAME: DP DION, RAYMOND 2255 PALM TREE DRIVE PUNTA GORDA FL 33950	NAME: ☐ Change ☐ Addition
NAME: DST DION, JEANNE 2255 PALM TREE DRIVE PUNTA GORDA FL 33950	NAME: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition	NAME: ☐ Change ☐ Addition
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NAME: ☐ Change ☐ Addition	NAME: ☐ Change ☐ Addition
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NAME: ☐ Change ☐ Addition	NAME: ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for the corporation's stated purpose. I further certify that the information included in this filing is true and correct and that the corporation shall have the same legal effect as if it were filed with the State of Florida. I further certify that I am authorized to file this report on behalf of the corporation and that the report is required by Chapter 19, Florida Statutes, and that my name appears in the filing of this report as required by the Florida Statutes.

SIGNATURE: *Raymond Dion*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Raymond Dion, President

4/28/95 813-637-8181