

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000026000 (6)**

1. Corporation Name

DIETEL'S PEANUTS INC.



Principal Place of Business

**320 SO. BRIGHTON DRIVE
PORT ORANGE FL 32127**

Mailing Address

**320 SO. BRIGHTON DRIVE
PORT ORANGE FL 32127**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**DIETEL, MICHAEL A
320 SO. BRIGHTON DRIVE
PORT ORANGE FL 32127**

3. Date Incorporated or Qualified

03/30/1995

3a. Date of Last Report

4. FCI Number

59-3307685

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 authority 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 607.06(2) and 607.15(6), 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 607.06(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE	☐ OFFICER
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. TITLE	☐ OFFICER
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	
9. TITLE	☐ OFFICER
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. TITLE	☐ OFFICER
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	
17. TITLE	☐ OFFICER
18. NAME	
19. STREET ADDRESS	
20. CITY, STATE, ZIP	

13.

1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, STATE, ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PV, S **MICHAEL DIETEL** ☐ Change ☒ Addition
320 S. BRIGHTON DR
PT. ORANGE FL 32127

T. **LINDA DIETEL** ☐ Change ☒ Addition
320 S. BRIGHTON DR.
PT. ORANGE, FL. 32127

14. I do hereby certify that the information supplied on this filing is true, correct, and complete, and that I am an officer or director of the corporation or the record 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:

Michael A. Dietel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL A. DIETEL

3-18-96

904-756-4384
Date of Filing #

CR2E034 (12/95)