FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000034089 1. Corporation Name

DALE E. ROCK, INC.

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90042 043 ***150.00



Principal Place	of Business	Mailing Address				
2446 HARBOUR WINTER PARK F		2446 HARBOUR WAY WINTER PARK FL 32792				DO NOT WRITE IN THIS SPACE
l						3. Date Incorporated or Qualifed 05/01/1995
2. Principal Pl	2a. Mailing Address	Address			4. FEI Number Applied For	
21		26				59-3317693 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cou	ntrv		This corporation owes the current year Intangible
	25	29 3	_	,		Personal Property Tax.
24		<u></u>	<u> </u>			10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent 81 Name					Name	
ROCK, DALE E						
2446	HARBOUR WAY FER PARK FL 32792				Street Addres	ss (P.O. Box Number is Not Acceptable)
AAIIAA	IER FARR FL 32/32			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, typed or finited name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TI	TLE	Vic	Resident Change Addition
NAME	ROCK, DALE E		1.2 NA	ME	The	ompson, Thomas H.
STREET ADDRESS	2446 HARBOUR WAY		1.3 ST	REET A	DDRESS 2/6	b Brighton way
CITY-ST-ZIP	WINTER PARK FL 32792		1.4 CT	TY-ST-2	IP Cas	ompson, Thomas A. Brighton Way sselberry, FL 32707 Change Addition
TITLE	STD	☐ DELETE	2.1 TIT	TLE		☐ Change ☐ Addition
NAME	ROCK, TERRI M		2.2 NA	ME		
STREET ADDRESS	2446 HARBOUR WAY		2.3 ST	REET A	ODRESS	
CITY-ST-ZIP	WINTER PARK FL 32792		2.4 C	ITY-ST-	ZIP	
TITLE		☐ DELETE	3.1 TI			☐ Change ☐ Addition
NAME !		~	3.2 NA	4ME		
STREET ADDRESS	 3,	the same of the sa	3.3 ST	REET A	DORESS	
CITY-ST-ZIP			3.4. C	ITY-ST-	ZIP	
TITLE		☐ DELETE	4.1 TF			☐ Change ☐ Addition
NAME			4. 2 N	AME		
STREET ADDRESS			4.3 ST	REET A	DDRESS	
CITY-ST-ZIP			4.4 CI	TY-ST <u>-</u> Z	ZIP	·
TITLE		☐ DELETE	5.1 TF	TLE		☐ Change ☐ Addition
NAME			5.2 NA	AME		
STREET ADDRESS			5.3 \$1	REET A	DORESS	
CITY-ST-ZIP			5.4 CI	TY-ST-2	ZIP	
TITLE		☐ DELETE	6.1 TI	TLE		☐ Change ☐ Addition
NAME			6.2 NA	AME		
STREET ADDRESS			6.3 ST	FREET A	DDRESS	
CITY OT 71D			6.4 CT	TY-ST-Z	ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

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