

FILE NOW: FILING FEE AFTER MAY

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF
SANDHURST
SECRETARY
DIVISION OF CORPORATIONS

DOCUMENT # P95000043335 (5)

1. Corporation Name

DENION & ASSOCIATES, P.A.



Principal Place of Business

Mailing Address

~~206 QUAYSIDE CIRCLE~~ **1025 S. SEMORAN BLVD** ~~206 QUAYSIDE CIRCLE~~ **1025 SOUTH SEMORAN BLVD**
~~SUITE 502~~ **BLVD - STE 1093** ~~SUITE 502~~ **STE 1093**
~~MAITLAND FL 32759~~ **WINTER PARK, FL** ~~MAITLAND FL 32759~~ **WINTER PARK, FL 32792**

2. Principal Place of Business

2a. Mailing Address

21 **1025 SOUTH SEMORAN BLVD** 26 **1025 SOUTH SEMORAN BLVD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **1093 - suite**

27 **STE 1093**

City & State

City & State

23 **WINTER PARK**

28 **WINTER PARK**

Zip

Country

Zip

Country

24 **32792** 25 **USA**

29 **32792** 30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DENION, JOSEPH B
206 QUAYSIDE CIRCLE
#502
MAITLAND FL 32759

81 Name

JOSEPH B. DENION

82 Street Address (P.O. Box Number is Not Acceptable)

1025 SOUTH SEMORAN BLVD - STE 1093

83

84 City

WINTER PARK

FL

85 Zip Code

32792

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

Joseph B. Denion

(NOTE: Registered Agent signature must be written)

21 June 96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **DENION, JOSEPH B**
STREET ADDRESS **206 QUAYSIDE CIRCLE, #502**
CITY - ST - ZIP **MAITLAND FL 32759**

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME **1100 S. ORLANDO AVE**
STREET ADDRESS **#508**
CITY - ST - ZIP **MAITLAND, FL 32751**

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **(New Address only)**
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

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*****200.00**

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:

Joseph B. Denion
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/96

407-677-3157

CR2E034 (12/95)